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ABSTRACT

This task listing is designed to be used in combination with the "Health Occupations Education Service Area Resource" in order to implement competency-based education in health occupations programs in Virginia. The task listing contains four major sections: (1) content/concept areas; (2) program and course description; (3) content outline; and (4) appendixes. Each content/concept area contains related validated tasks. The purpose and general description of the course, including suggested grade levels, are provided. The course outline, arranged topically, gives educators a guide to areas to be covered in the course, including the health care industry, the health care worker, health careers, regulation, safety, epidemiology, the health care consumer, first aid, and cardiopulmonary resuscitation. The appendixes contain a sample of an occupational area outline, a health careers list, information on health regulatory boards, and an abbreviated course outline for administrators. (KC)

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# APPLICATION OF TASK LISTING

This task listing has been prepared for use in developing and selecting instructional materials and in implementing competency-based education for the following program and course:

| Program | Course |
|---|---|
| Introductory | Introduction to Health Occupations (Va. Code: 8302) |

Introduction to Health Occupations is recommended as a prerequisite for the following programs: Dental Aide, Emergency Medical Technology, Health Careers Cluster, Medical Assistant, Nurse's Assistant, Practical Nursing, and Surgical Technology.

This course is introductory in nature; therefore, no specific or related job titles from the Dictionary of Occupational Titles are listed here. Occupational and DOT information for some health care positions can be found in Section I of the Health Occupations Education Service Area Resource. CIP Codes for a number of health occupations are listed in Appendix B in this guide.

Additional information concerning the application and use of this publication may be obtained from the following office:

Health Occupations Education Service
Vocational and Adult Education
Department of Education
P.O. Box 6Q
Richmond, Virginia 23216
(804) 225-2087

# TASK LISTING FOR INTRODUCTION TO HEALTH OCCUPATIONS

Developed by
Health Assistant Project
Virginia Association of Allied Health Professions

and

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1986

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# INTRODUCTION AND USE

## INTRODUCTION

One of the major characteristics of competency-based education (CBE) is that the course content is based upon actual jobs or tasks performed by the worker. In Virginia, the Department of Education has established standards for competency-based education. According to these standards, competencies must be role-relevant and based upon appropriate research. This standard states:

> Role-relevant competencies are identified and stated.
>
> The competencies, with standards, will be identified through V-TECS, IDECC, and other appropriate research. Advisory committees should be used to review competencies and standards. Competencies in the affective domain will be included. Role-relevant competencies for occupational preparation programs are those that specifically relate to the occupation for which the student is being prepared, as well as to the personal needs of the student. Role-relevant competencies are related also to orientation, exploration, and/or industrial arts experiences which have been identified for students.

Therefore, role-relevant jobs or tasks, called competencies in CBE, must be identified and validated before instructional materials are developed and subsequent instruction takes place.

Since this course is introductory in nature, the tasks are not for occupational preparation but are designed for the following purposes:

- to acquaint the student with the health care industry
- to survey various health careers
- to help the student determine if he/she wishes to become a worker in the health care industry
- to help the student in choosing a health career.

The Task Listing for Introduction to Health Occupations was developed by the Teacher Technical Committee to a special Health Occupations Education (HOE) project. The eleven-member committee was composed of representatives of the health care industry, the State Department of Education, and seven teachers with experience in the development and implementation of health occupations programs. Members were Joyce Bishop; Roxanne

Burnley; Patricia Eakin; Kathleen Kunze; Barbara Mumpower; Phyllis Russell; Nancy Sparks; Carol Stickney; Jennie Seaton, Ed.D.; Ned Swartz, Ed.D.; and Carol Hampton, Chairperson. The project was managed in contract #VA-83-C-131-2-HO-001 between the Virginia Association of Allied Health Professions (VAAHP) and the Virginia Department of Education, Division of Vocational and Adult Education, Health Occupations Education Service under provisions of the Vocational Education Amendments of 1976 (Public Law 94-482).

Information for the task listing and course outline was obtained from the following sources:

1. The current V-TECS catalog for the Health Care Worker
2. Review of the literature and selection of appropriate competency-based materials developed by other states and systems
3. Input from a broadly based, statewide health occupations program advisory committee representing health care industry workers and educators in public schools, community colleges, universities, and hospitals
4. Input from other teachers of the Introduction to Health Occupations course (8302) and Health Careers Cluster Program.

The next step was validation of the task list, which involved the following:

1. Field testing of Introduction to Health Occupations by Prince William County Public Schools
2. Review by writing team members
3. Review by the advisory committee to the health occupations special project
4. Review by selected representatives of the health care industry
5. Final review and editing by state staff.

As part of the validation process, the following individuals reviewed and critiqued the outline and related materials in this document:

Susan W. Cahoon
Director of Health Site Programs
American Heart Association, Virginia Affiliate

Joseph M. Doherty, D.D.S.
Director, Division of Dental Health
Virginia Department of Health

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Associate Professsor of Speech Pathology Emeritus
Medical College of Virginia/Virginia Commonwealth University

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Director, Physical Therapy
Medical College of Virginia Hospitals/Virginia Commonwealth University

Harold J. McGrane, D.D.S.
Assistant Director, Division of Dental Health
Virginia Department of Health

Richard D. Morrison
Policy Analyst
Virginia Department of Health Regulatory Boards

Stuart D. Ogren
President
Virginia Hospital Association

It is important in implementation, as well as in development, to keep the task listing broadly based to apply to the more than 200 health careers.

## USE

This task listing is designed to be used in conjunction with the Health Occupations Education Service Area Resource in order to implement competency-based education in the health program. The service area resource contains information which pertains to all programs within Health Occupations Education. The four sections of the resource are titled: Occupational Information, Student Organizations (HOSA), Classroom Management Systems, and Recording Systems.

This task listing contains four major sections: 1) Content/Concept Areas, 2) Program and Course Description, 3) Content Outline, and 4) Appendices. Each Content/Concept Area contains related validated tasks. The purpose and a general description of the course, including suggested grade levels, are included in the Program and Course Descriptions. The Course Outline, arranged topically, provides educators with a helpful guide, illustrating areas to be covered in the course. The Appendices contain Appendix A, a sample of an occupational area outline; Appendix B, Health Careers; Appendix C, Health Regulatory Boards; and Appendix D, an abbreviated course outline for administrators.

The steps listed below should be followed when using the task listing and service area resource to implement CBE in a vocational program or course:

**Using the Introduction to Health Occupations Task Listing:**

1. Review tasks. Review the Content/Concept Areas section to determine whether all task/competencies are included for the region or locality in which the program or course is offered. If additional task/competencies are required for the program/course, include them in the instructional program.
2. Review course outline. Revise the outline sequence if additional task/competencies have been identified or if the sequencing needs to be changed.
3. Develop performance objectives. Construct statements, using measurable terms for particular behaviors to be exhibited by a learner under specified conditions. Each identified task should have a corresponding performance objective.
4. Develop criterion-referenced measures. Construct criterion-referenced measures, tests, and assessment materials for each task. Develop criterion-referenced measures and tests for all additional competencies identified.
5. Develop enabling objectives. Identify all individual sub-goals that a learner must know or be able to do to complete each performance objective.
6. Develop instructional materials and activities. Develop instructional materials and plan activities such as student handouts, learning packages, clinics, demonstrations, lab exercise sheets, etc. Review instructional materials currently being used to determine compatibility with the competencies identified for the program/course.
7. Identify instructional equipment and aids. Develop a list of tools, equipment, and supplies that aid in the performance of each task. Also, identify audiovisual and reference materials that complement instruction of each task.

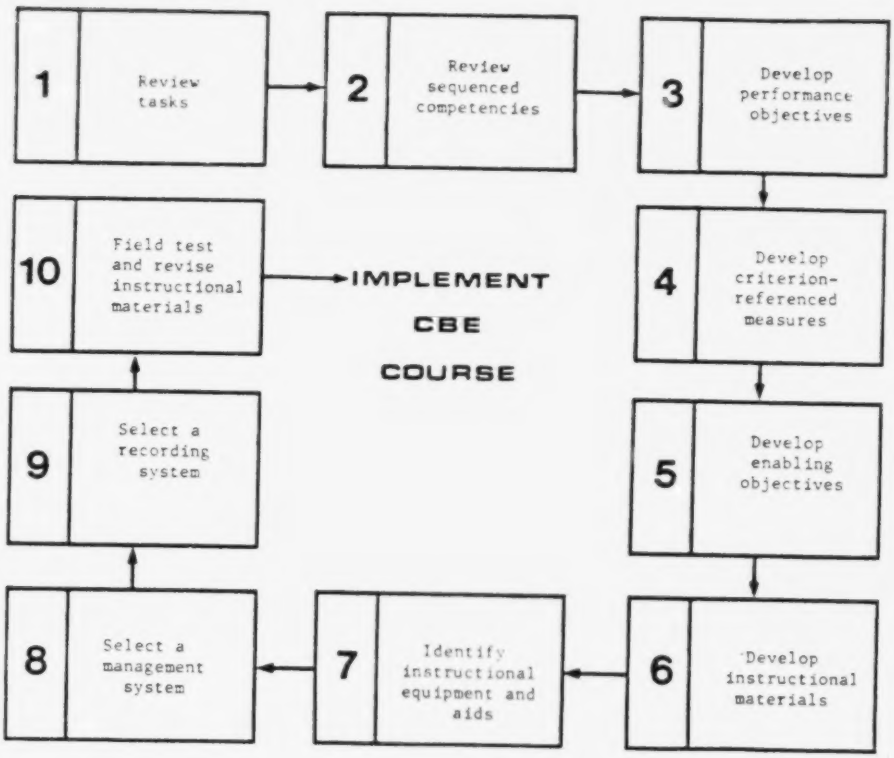
**Using the Resource:**

8. Select a management system. Select a classroom management or delivery system from Section III. Modification may be necessary to meet individual requirements. Information on the Health Occupations Students of America student organization is contained in Section II for ease of integration into classroom activities.
9. Select a recording system. Design or select a student recording system from Section IV. The decision to select a particular recording system will depend on program requirements and local administrative procedures. A variety of sample system designs has been included in the resource.

**Field Testing:**

10. Field test and revise instructional materials. This is the final step prior to the implementation of CBE materials in a vocational program.

The use of the service area resource and this task list for implementing CBE in a vocational program or course is illustrated by the following diagram:




The preceding procedure may be modified to meet local program requirements and needs. It is important to realize that these materials represent only one resource and that additional materials may be necessary to meet local or regional standards.

# CONTENT/CONCEPT AREAS

1. INTRODUCING THE COURSE
2. PARTICIPATING IN HEALTH OCCUPATIONS STUDENTS OF AMERICA (HOSA)
3. EXPLORING THE HEALTH CARE INDUSTRY
4. BECOMING A HEALTH CARE WORKER
5. DISCOVERING THE VARIETY OF HEALTH CAREERS
6. UNDERSTANDING HEALTH CARE REGULATORY SYSTEMS
7. PRACTICING SAFETY
8. LEARNING ABOUT EPIDEMIOLOGY
9. BECOMING A KNOWLEDGEABLE HEALTH CARE CONSUMER
10. ADMINISTERING FIRST AID
11. PROVIDING CARDIOPULMONARY RESUSCITATION
12. PREPARING FOR A HEALTH CAREER

# CONTENT/CONCEPT AREA: 1. INTRODUCING THE COURSE

## TASK/COMPETENCY

1.1 Explain the purpose of the course

1.2 Define long- and short-term career goals

1.3 List the student responsibilities in the course

1.4 Identify ways to improve study habits

# CONTENT/CONCEPT AREA: 2. PARTICIPATING IN HEALTH OCCUPATIONS STUDENTS OF AMERICA (HOSA)

## TASK/COMPETENCY

2.1 Define terms relevant to HOSA

2.2 Identify the purposes of HOSA

2.3 Participate in a HOSA club meeting using parliamentary procedure and a prepared agenda

2.4 Explain officer roles, responsibilities, and qualifications

2.5 Describe various club activities

# CONTENT/CONCEPT AREA: 3. EXPLORING THE HEALTH CARE INDUSTRY

## TASK/COMPETENCY

3.1 Define terms relevant to the health care industry

3.2 Identify outstanding milestones in medical history

3.3 Compare governmental and non-governmental health care systems

3.4 Explain the three major factors influencing health care

3.5 List various health care delivery systems

3.6 Describe the various issues affecting the future of health care

# CONTENT/CONCEPT AREA: 4. BECOMING A HEALTH CARE WORKER

## TASK/COMPETENCY

4.1 Detail the physical, mental, and social health characteristics of the successful health care worker

4.2 Demonstrate appropriate work habits for the health care worker

4.3 Define ethics as related to the health care worker

4.4 Describe the legal aspects pertaining to health care

# CONTENT/CONCEPT AREA: 5. DISCOVERING THE VARIETY OF HEALTH CAREERS

## TASK/COMPETENCY

5.1 Define terminology related to the study of health careers

5.2 List the duties performed by a worker in a specific health career

5.3 Identify specialties associated with various health occupations

5.4 State educational requirements necessary for selected health careers

5.5 Identify personal qualifications needed for one or more health careers

5.6 State the wages and earning potential related to selected occupations

5.7 Describe the licensing requirements for specific careers

5.8 Explain the work environment associated with particular occupations

5.9 Diagram a career ladder for selected health occupations

5.10 List the advantages and disadvantages of specific occupations

5.11 Identify professional organizations and publications related to particular occupations

# CONTENT/CONCEPT AREA: 6. UNDERSTANDING HEALTH CARE REGULATORY SYSTEMS

## TASK/COMPETENCY

6.1 Identify Virginia's law for the regulation of health professions and occupations

6.2 Describe the purposes of health regulatory boards

6.3 Describe public participation in health regulation

6.4 Differentiate between the Virginia Department of Health Regulatory Boards and the Virginia Commission of Health Regulatory Boards

6.5 Explain the methods of regulation of health care providers

6.6 List the ten health professional boards

6.7 Identify specific educational requirements for a regulated occupation

6.8 State the examination requirements for a specific profession

6.9 Define reciprocity and explain how it applies to various professions

# CONTENT/CONCEPT AREA: 7. PRACTICING SAFETY

## TASK/COMPETENCY

7.1 Identify and explain health care safety regulations

7.2 Demonstrate the use of proper body mechanics

7.3 Explain fire safety procedures

# CONTENT/CONCEPT AREA: 8. LEARNING ABOUT EPIDEMIOLOGY

## TASK/COMPETENCY

8.1 Define terms relevant to epidemiology

8.2 Explain the purposes of health maintenance and disease control

8.3 Describe the purposes and methods of immunizations and medical asepsis

8.4 Demonstrate aseptic handwashing techniques

8.5 Identify the leading causes of death in the United States

# CONTENT/CONCEPT AREA: 9. BECOMING A KNOWLEDGEABLE HEALTH CARE CONSUMER

## TASK/COMPETENCY

9.1 Define terms relevant to consumerism

9.2 List examples of good health habits

9.3 Explain the rights of a health care consumer

9.4 Compare the types, purposes, and costs of insurance

9.5 Describe the concept of health maintenance organizations

9.6 Identify the effects of America's aging population on health care systems

9.7 Explain varying viewpoints that influence individual health care

9.8 Identify the effects of marketing in the health care industry

# CONTENT/CONCEPT AREA: 10. ADMINISTERING FIRST AID

## TASK/COMPETENCY

| | |
|---|---|
| 10.1 | Identify simple first aid terminology and abbreviations |
| 10.2 | Give first aid for choking conscious/unconscious adult, infant, child |
| 10.3 | Recognize signs and symptoms of shock, and demonstrate proper treatment |
| 10.4 | Treat external bleeding in major/minor wounds |
| 10.5 | Give first aid for poisoned conscious/unconscious victim |
| 10.6 | Classify and give appropriate treatment for burns |
| 10.7 | Treat victim of heat and cold exposure |
| 10.8 | Give first aid for bone/joint injuries |
| 10.9 | Apply splints |
| 10.10 | Apply a sling |
| 10.11 | Apply circular, spiral, figure-eight, and fingertip bandages |
| 10.12 | Identify procedures to follow for dental injuries |

# CONTENT/CONCEPT AREA: 11. PROVIDING CARDIOPULMONARY RESUSCITATION

## TASK/COMPETENCY

11.1 Perform one-rescuer CPR (Heartsaver)

11.2 Perform one-rescuer CPR on an adult

11.3 Perform two-rescuer CPR on an adult

11.4 Clear airway obstruction of a conscious victim

11.5 Clear airway obstruction of choking victim who becomes unconscious

11.6 Clear airway obstruction of unconscious victim

11.7 Perform infant resuscitation

11.8 Perform CPR for conscious choking infant

11.9 Perform CPR for choking infant who becomes unconscious or is found unconscious

# CONTENT/CONCEPT AREA: 12. PREPARING FOR A HEALTH CAREER

## TASK/COMPETENCY

12.1. Set career goals and review personal qualifications

12.2 Evaluate the course

# PROGRAM AND COURSE DESCRIPTIONS

PROGRAM TITLE: INTRODUCTORY

DESCRIPTION: Introduction to Health Occupations is a single-period, one-year course designed to introduce to the student all health occupations and to develop basic skills common to all health occupations. The purposes of the course include the following:

* to acquaint the student with the health care industry
* to introduce the student to all health occupations
* to survey various health careers
* to enable the student to select one or more careers for an in-depth study
* to help the student determine if he/she wishes to become a worker in the health care industry
* to help the student in choosing a health career, and
* to help the student select a specific occupational preparation program.

Introduction to Health Occupations is considered a foundation course that contains generic skills and knowledge necessary for all occupational program offerings. Additionally, the course is recommended to those students interested in a career that requires postsecondary study.

CIP CODE: Assigned according to occupational sequence selected

SUGGESTED GRADE LEVELS: 9, 10

| APPROVED COURSES | VA COURSE CODE | DOT CODE AND TITLE |
|---|---|---|
| Introduction to Health Occupations | 8302 | Not Applicable |

# INTRODUCTION TO HEALTH OCCUPATIONS

COURSE DESCRIPTION: Introduction to Health Occupations is a single-period, one-year course that introduces the student to all health occupations and develops basic skills common to all health occupations. It is recommended as the first course for the following occupational offerings:

Practical Nursing I 8357
Nursing Assistant I 8360
Health Assistant I 8331
Emergency Medical Technician-A 8333
Dental Aide I 8328
Medical Assistant I 8345
Surgical Technologist I 8351

Students study families of health careers, such as dental, medical, nursing, allied health, and related occupations. Introduction to basic health care skills prepares students for advanced occupational skill training. Organizations for health care, financing of patient services, and ethics may be studied. Field trips to health care facilities and interviews with selected health workers can be included. Student volunteer activities, including shadowing experiences and selected skills practice in health care facilities, are organized by the teacher.

PREREQUISITE: None

SUGGESTED GRADE LEVEL: 9-10

## TASK/COMPETENCY SEQUENCE

1.1 Explain the purpose of the course
1.2 Define long- and short-term career goals
1.3 List the student responsibilities in the course
1.4 Identify ways to improve study habits
2.1 Define terms relevant to HOSA
2.2 Identify the purposes of HOSA
2.3 Participate in a HOSA club meeting using parliamentary procedure and a prepared agenda
2.4 Explain officer roles, responsibilities, and qualifications
2.5 Describe various club activities
3.1 Define terms relevant to the health care industry
3.2 Identify outstanding milestones in medical history
3.3 Compare governmental and non-governmental health care systems
3.4 Explain the three major factors influencing health care
3.5 List various health care delivery systems
3.6 Describe the various issues affecting the future of health care
4.1 Detail the physical, mental, and social health characteristics of the successful health care worker

4.2 Demonstrate appropriate work habits for the health care worker
4.3 Define ethics as related to the health care worker
4.4 Describe the legal aspects pertaining to health care
5.1 Define terminology related to the study of health careers
5.2 List the duties performed by a worker in a specific health career
5.3 Identify specialties associated with various health occupations
5.4 State educational requirements necessary for selected health careers
5.5 Identify personal qualifications needed for one or more health careers
5.6 State the wages and earning potential related to selected occupations
5.7 Describe the licensing requirements for specific careers
5.8. Explain the work environment associated with particular occupations
5.9 Diagram a career ladder for selected health occupations
5.10 List the advantages and disadvantages of specific occupations
5.11 Identify professional organizations and publications related to particular occupations
6.1 Identify Virginia's law for the regulation of health professions and occupations
6.2 Describe the purposes of health regulatory boards
6.3 Describe public participation in health regulation
6.4 Differentiate between the Virginia Department of Health Regulatory Boards and the Virginia Commission of Health Regulatory Boards
6.5 Explain the methods of regulation of health care providers
6.6 List the ten health professional boards
6.7 Identify specific educational requirements for a regulated occupation
6.8 State the examination requirements for a specific profession
6.9 Define reciprocity and explain how it applies to various professions
7.1 Identify and explain health care safety regulations
7.2 Demonstrate the use of proper body mechanics
7.3 Explain fire safety procedures
8.1 Define terms relevant to epidemiology
8.2 Explain the purposes of health maintenance and disease control
8.3 Describe the purposes and methods of immunizations and medical asepsis
8.4 Demonstrate aseptic handwashing techniques
8.5 Identify the leading causes of death in the United States
9.1 Define terms relevant to consumerism
9.2 List examples of good health habits
9.3 Explain the rights of a health care consumer
9.4 Compare the types, purposes, and costs of insurance
9.5 Describe the concept of health maintenance organizations
9.6 Identify the effects of America's aging population on health care systems
9.7 Explain varying viewpoints that influence individual health care
9.8 Identify the effects of marketing in the health care industry
10.1 Identify simple first aid terminology and abbreviations
10.2 Give first aid for choking conscious/unconscious adult, infant, child
10.3 Recognize signs and symptoms of shock, and demonstrate proper treatment
10.4 Treat external bleeding in major/minor wounds
10.5 Give first aid for poisoned conscious/unconscious victim
10.6 Classify and give appropriate treatment for burns
10.7 Treat victim of heat and cold exposure
10.8 Give first aid for bone/joint injuries
10.9 Apply splints
10.10 Apply a sling
10.11 Apply circular, spiral, figure-eight, and fingertip bandages
10.12 Identify procedures to follow for dental injuries
11.1 Perform one-rescuer CPR (Heartsaver)

| | |
|---|---|
| 11.2 | Perform one-rescuer CPR on an adult |
| 11.3 | Perform two-rescuer CPR on an adult |
| 11.4 | Clear airway obstruction of a conscious victim |
| 11.5 | Clear airway obstruction of choking victim who becomes unconscious |
| 11.6 | Clear airway obstruction of unconscious victim |
| 11.7 | Perform infant resuscitation |
| 11.8 | Perform CPR for conscious choking infant |
| 11.9 | Perform CPR for choking infant who becomes unconscious or is found unconscious |
| 12.1 | Set career goals and review personal qualifications |
| 12.2 | Evaluate the course |

# CONTENTS

## INTRODUCTION TO HEALTH OCCUPATIONS (8302)


I. Introduction to Course

A. Purpose, competencies, textbooks, and references of course

B. Student goals

1. Long-term
2. Short-term
3. Personal
4. Career

C. Classroom management

1. Student responsibilities
2. Grading policies
3. School policies

D. Study habits

1. Note taking
2. Outlining
3. Test taking
4. Study methods

II. Health Occupations Students of America (HOSA)

A. Terminology

B. Purposes

C. Structure of meetings

1. Parliamentary procedure
2. Agenda

D. Functions and qualifications of officers

E. Activities of club

1. Leadership skill development
2. Use of community health resources
3. Involvement in community service
4. Participation in school service
5. Public relations skills
6. Social-recreational skills
7. Student achievement and recognition
8. Student competition
9. Fund raising

III. Health Care Industry

A. Terminology

B. History

C. Organization

1. Government agencies

a. World Health Organization (WHO)
b. U.S. Department of Health and Human Services
c. Health departments
   1) State
   2) Local
d. Government hospitals

2. Non-government agencies

a. Hospitals and nursing homes
   1) Public
   2) Private
   3) Charitable
b. Non-profit organizations
   1) American Heart Association
   2) American Cancer Association
   3) American Medical Association
   4) American Dental Association
   5) Other

3. Profit-making agencies

D. Major factors influencing health care

1. Cost
   a. Indigent patient
   b. Insurance costs and limitations

2. Access
   a. Location
      1. Proximity of health care centers to residence
      2. Access to center
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      1. Hours of operation and scheduling
      2. Days of operation and scheduling
   c. Discrimination
      1. Cultural factors
      2. Socio-economic factors

III. D. 3. Quality

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b. Recipient needs
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   3. Social
   4. Educational
c. Approaches to meeting needs
   1. Team
   2. Holistic
   3. Other

E. Health care delivery systems

1. Private medical and dental offices
2. Hospitals
3. Nursing homes and other extended care facilities
4. Rehabilitation centers
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6. Clinics
7. Health maintenance organizations (HMO's)
8. Private diagnostic centers
9. Pharmacies
10. Home health care services
11. Other

F. Future of health care industry

1. Cost of health care
2. Access to health care
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5. Technological advances
6. Ethical issues in health care

IV. Health Care Worker

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   b. Appearance
   c. Uniform and dress
   d. Good health habits
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1) Love
2) Security
3) Acceptance
b. Self awareness
1) Interests
2) Abilities

3. Social health

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b. Values
1) Honesty
2) Integrity

B. Employment skills

1. Dependability
2. Tactfulness
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4. Punctuality/attendance
5. Accuracy
6. Interpersonal relationships
7. Enthusiasm/initiative

C. Ethics

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2. Philosophy of code of ethics
3. Ethical issues

D. Legal aspects

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2. Patient records
3. Negligence
4. Malpractice
5. Patient's rights

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A. Terminology
B. Duties
C. Specialities
D. Education
E. Personal qualifications
F. Earning potential
G. Licensing
H. Work environment
I. Career ladders
J. Advantages/disadvantages
K. Professional organizations and publications

VI. Regulation of the Health Professions and Occupations**

A. Virginia's law: See Code of Virginia, Chapter 29, Section 54

B. Purpose

1. Consumer protection
2. Initial competency
3. Professional discipline
4. Complaint resolution
5. Incompetent practitioners

C. Public participation in regulation

1. Public participation
2. Citizen involvement

D. Virginia Department of Health Regulatory Boards

E. Virginia Commission of Health Regulatory Boards

F. Methods of regulation of health care providers

1. Registration
2. Statutory Certification
3. Licensure

G. Virginia's ten health professional boards and whom they regulate

1. Board of Medicine
2. Board of Nursing
3. Board of Psychology
4. Board of Optometry
5. Board of Pharmacy

* A sample information sheet based on this outline is illustrated in Appendix A; a comprehensive listing of health careers is provided in Appendix B.

** Appendix C contains detailed tables on aspects of the Health Regulatory Boards.

VI. G. 6. Board of Dentistry
7. Board of Professional Counselors
8. Board of Social Work
9. Board of Funeral Directors and Embalmers
10. Board of Veterinary Medicine

H. Educational or other entry requirements for regulated professions or occupations (by Board)

I. Examination requirements for regulated professions and occupations (by Board)

J. Reciprocity provisions

VII. Safety

A. Safety regulations

1. Occupational Safety and Health Act (OSHA)
2. Institutional policies and procedures
3. General safety principles (including electrical)
4. Risk management

B. Body mechancics for the health worker

1. Balance and alignment
2. Transfer/transport technique
3. Basic body positions
4. Assistive devices

C. Fire safety

1. Local fire department regulations
2. Institutional policies and procedures
3. Initial patient rescue
4. Patient carries

VIII. Epidemiology

A. Terminology

B. Purpose

1. Health maintenance
2. Infection/communicable disease prevention

C. Methods

1. Immunizations
2. Medical asepsis

VIII. D. Aseptic handwashing

E. Leading causes of death

IX. Consumerism

A. Terminology

B. Health maintenance

1. Diet
2. Exercise
3. Sleep/rest
4. Proper balance between work and recreation
5. Health habits

C. Consumer rights

1. Increased awareness of rights
2. Patient's Bill of Rights

D. Insurance

1. Purpose
2. Types

a. Government
   1) Federal insurance (Medicare)
   2) State insurance supplement (Medicaid)
b. Privately-sponsored health insurance
   1) Blue Cross
   2) Blue Shield
   3) Other
c. Worker's compensation
d. Prepaid group practice

3. Cost

E. Health maintenance organizations

F. Effect of the elderly on health care systems

G. Varying viewpoints in health care

1. Folk medicine
2. Supernatural beliefs
3. Religious beliefs

H. Marketing in the health care industry

X. First Aid

A. Terminology and abbreviations

X. B. Obstructed airway

1. Adult
   a. Conscious
   b. Unconscious
2. Child/infant
   a. Conscious
   b. Unconscious

C. Shock

1. Signs and symptoms
2. Treatment

D. Bleeding wounds

1. Treatment of minor wounds
2. Treatment of major wounds

E. Victim of poisoning

1. Conscious
2. Unconscious

F. Burns

1. Degrees
2. Treatment

G. Heat and cold exposure

1. Recognition
2. Treatment

H. Bone and joint injuries

1. Types and treatment of fractures
   a. Simple (closed)
   b. Compound (open)
2. Types and treatment of sprains
3. Types and treatment of strains

I. Splint application procedures

X. J. Sling application procedures

K. Bandage application procedures

1. Circular
2. Spiral
3. Figure eight
4. Fingertip

L. Dental injuries

1. Loosened, chipped, or broken teeth
2. Evulsed or knocked-out teeth

XI. Cardiopulmonary resuscitation

A. One-rescuer CPR (Heartsaver)

B. One-rescuer CPR

C. Two-rescuer CPR

D. Obstructed airway

1. Conscious victim, sitting or standing; complete airway obstruction
2. Choking victim who becomes unconscious
3. Unconscious victim, supine

E. Infant resuscitation

F. Conscious choking infant

G. Choking infant who becomes unconscious or is found unconscious

XII. Summary

A. Career goals

1. Personal qualifications
2. Inventory of skills
3. Career identification

B. Course evaluation

# APPENDIX A

## OCCUPATIONAL AREA OUTLINE

The following occupational area outline was prepared by Ann Flowers, Ed.D., Associate Professor of Speech Pathology Emeritus, Medical College of Virginia/Virginia Commonwealth University for the occupational areas of Speech/Language Pathology, Audiology, Habilitative Audiology, and Teachers of the Hearing Impaired. Information contained in this outline is based on data presented in A Classification of Instructional Programs.

Competencies identified in content/concept area 5 of the task listing and section V of the content outline are directly correlated to the headings of this occupational outline. Information specifically related to the occupational areas listed above is then presented to illustrate the intent of the competencies.

# OCCUPATIONAL AREA OUTLINE

# FOR

# SPEECH/LANGUAGE PATHOLOGY, AUDIOLOGY, HABILITATIVE AUDIOLOGY, AND TEACHERS OF THE HEARING IMPAIRED

A. Terminology

1. Speech/Language Pathology is the study and treatment of articulation and language disorders for individuals of all ages. Articulation is the motor activity of the lips, tongue, palate, etc., necessary to produce the sounds of language. Language deals with the understanding of verbal messages, the ability to store those messages and interpret them in an orderly fashion, and to produce coherent messages for those in the environment.

2. Audiology is a science that deals with the way in which individuals hear sounds and language. Many diagnostic devices of an electronic nature are available for those employed in this field.

3. Habilitative Audiology is the sum of the services employed after a hearing impairment has been found. These services prepare the patient to enter a learning situation with an improved ability to gain from that situation.

4. Teachers of the Hearing Impaired are those who teach not only communication skills but also regular school subjects to their clients.

B. Occupational information

1. Duties of Speech/Language Pathologist

a) Administer appropriate speech/language tests to determine central and peripheral communication deficits
b) Provide remedial measures through direct therapy
c) Select and recommend devices for alternate communication systems when necessary
d) Operate various instruments involved in diagnostic and therapeutic procedures (tape recorders, computerized therapy programs, etc.)
e) Write evaluative reports and progress notes
f) Counsel with family and significant others
g) Conduct research
h) Function supportively for other members of a rehabilitation team
i) Supervise assistants and aides
j) Teach and demonstrate speech pathology techniques to personnel in other agencies
k) Maintain caring relationship with clients

2. Duties of Audiologists

a) Conduct and interpret audiological vestibular examinations
b) Operate all types of special audiological instruments such as evoked potential instrumentation, electronystagmographs, and other instruments used to measure the function of the auditory and vestibular system
c) Conduct non-medical evaluative procedures of the central and peripheral auditory system regardless of age, physical, or mental status of the individual
d) Refer clients to other appropriate professionals when necessary
e) Select, fit, and recommend the use of amplification, specific hearing aids, and tinnitus instruments when indicated
f) Provide orientation in the use of hearing aids
g) Counsel family and significant others in how to deal with patient's disability
h) Visit other agencies and community groups to explain and demonstrate audiological techniques
i) Conduct research in communicative disorders
j) Serve as a member of a rehabilitative team
k) Supervise assistants and aides
l) Be able to work independently but to be accountable to administrator

C. Specialties

1. Speech/language pathologists may decide to specialize in any one or a combination of the following:
a) Aphasia
b) Motor speech disorders
c) Voice disorders
d) Stuttering
e) Language delay
f) Speech/language for the foreign born
g) Language remediation

2. Audiologists may decide to specialize in any one or a combination of the following:
a) Diagnostic procedures prior to otological surgery
b) General audiological diagnostics
c) Brain stem audiology
d) Pediatric audiology
e) Geriatric audiology
f) Fitting of hearing aids

3. Habilitative audiologists are specialists by choice of profession

4. Teachers of the hearing impaired are specialized by choice of profession

D. Education

1. Must obtain bachelor's degree in a pre-professional four-year degree program

2. Master's degrees are available at selected colleges and universities

3. Leadership positions and positions requiring extensive training are obtained by those completing a doctoral degree program

4. Virginia institutions of higher education that offer at least a master's degree include:
   a) The University of Virginia
   b) James Madison University
   c) Hampton Institute
   d) Old Dominion University
   e) Radford University.

E. Personal qualifications

1. Must like to work with people of all age groups

2. Must be able to work with persons who are physically or mentally handicapped

3. Must maintain confidentiality

4. Must have a desire to help and provide moral support

F. Earning potential

1. Beginning salary in systems with limited resources--$12,000

2. Average salary between $15,000-$25,000

3. Advanced degrees and training and personal qualifications may lead to salaries at the top of scale -- $60,000-$70,000

G. Licensing

1) In Virginia a state licensure law is in effect for persons working in private practice and in clinical settings. Some public school clinicians may wish to become licensed, although it is not required of them.

2) Communication disorders specialists in the schools need certification from the State Board of Education.

3) Certification is granted to communication disorders specialists by the national organization, The American Speech, Language and Hearing Association. The examination sponsored by this organization provides the criteria for licensure.

H. Work environment

1. Public and private schools
2. College and university clinics
3. College and university faculties
4. Clinics sponsored by community organizations
5. Clinics sponsored by government agencies such as a state health department
6. Pre-school programs
7. Residential schools for the handicapped
8. Nursing homes and programs for the geriatric population
9. Research centers

I. Career ladders

Avenues for advancement include:

1. Additional training
2. Advanced degrees
3. Publishing material
4. Involvement in specialized research projects
5. Administrative positions

J. Advantages and disadvantages

1. Disadvantages

a. A long and difficult training program
b. Constant reading and studying is required to keep up with changes in procedures
c. Working with handicapped individuals requires patience and stamina
d. Funding for positions is sometimes undependable, especially where grants are involved
e. Long hours are often required
f. Treatment rooms may not be well equipped

2. Advantages

a. An opportunity to see very favorable changes in the client as a result of remediation
b. Independence in making determination of a client's problem and giving follow-through remediation
c. Many job opportunities for a well qualified applicant
d. Advancement opportunities are excellent

K. Professional organizations and publications

1. American Speech, Language, Hearing Association
10801 Rockville Pike
Rockville, MD 20852

a) Journal of Speech and Hearing Disorders
(quarterly)
b) Journal of Speech and Hearing Research
(quarterly)
c) ASHA Magazine
(monthly)
d) Language, Speech & Hearing Services in Schools
(quarterly)
e) Directory of ASHA Members
(biennially)

2. Speech and Hearing Association of Virginia
109 New Cabell Hall
Charlottesville, VA

a) The Journal of the Speech and Hearing Association of Virginia
b) Directory of SHAV Members
(biennially)

# APPENDIX B

## HEALTH CAREERS

Over 200 careers are identified in the health care industry. The following is a comprehensive listing based on the organization recommended in A Classification of Instructional Programs (CIP) by the National Center for Education Statistics, 1981. CIP Code numbers are included for reference. This publication contains definitions of each instructional program and is recommended as a resource. The document costs $7.50 and is available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402

The specific career listing in each category is to be used as a guide since there may not be time to cover every career and since the listing is not inclusive.

The following information should be addressed for each career studied:

Terminology
Duties
Specialities
Education
Personal qualifications
Earning potential
Licensing
Work environment
Career ladders
Advantages/disadvantages
Professional organizations/publications

| | | CIP CODE |
|---|---|---|
| A. | Medicine | 13.10 |
| 1. | Medicine, General | 13.1001 |
| 2. | Allergies and Endomology | 13.1002 |
| 3. | Anesthesiology | 13.1003 |
| 4. | Colon and Rectal Surgery | 13.1004 |
| 5. | Dermatology | 13.1005 |
| 6. | Emergency Medicine | 13.1006 |
| 7. | Family Practice | 13.1007 |
| 8. | Geriatrics | 13.1008 |
| 9. | Immunology | 13.1009 |
| 10 | Internal Medicine | 13.1010 |
| 11. | Neurological Surgery | 13.1011 |
| 12. | Nuclear Medicine | 13.1012 |
| 13. | Obstetrics and Gynecology | 13.1013 |
| 14. | Ophthalmology | 13.1014 |
| 15. | Orthodontic Surgery | 13.1015 |
| 16. | Orthopedic | 13.1016 |
| 17. | Otorhinolaryngology/Otolaryngology | 13.1017 |
| 18. | Pathology | 13.1018 |

| | | CIP CODE |
|---|---|---|
| 19. | Pediatrics | 18.1019 |
| 20. | Physical Medicine and Rehabilitation | 18.1020 |
| 21. | Plastic Surgery | 18.1021 |
| 22. | Preventive Medicine | 18.1022 |
| 23. | Psychiatry | 18.1023 |
| 24. | Neurology | 18.1024 |
| 25. | Radiology | 18.1025 |
| 26. | Surgery | 18.1026 |
| 27. | Thoracic Surgery | 18.1027 |
| 28. | Urology | 18.1028 |
| 29. | Medicine, Other | 18.1099 |
| 30. | Osteopathic Medicine | 18.13 |
| 31. | Pre-Medicine | 18.18 |
| 32. | Pre-Veterinary | 18.20 |
| 33. | Veterinary Medicine | 18.24 |
| B. | Dentistry | 18.04 |
| 1. | Dentistry, General | 18.0401 |
| 2. | Dental Public Health | 18.0402 |
| 3. | Endodontics | 18.0403 |
| 4. | Oral/Maxial Facial Surgery | 18.0404 |
| 5. | Oral Pathology | 18.0405 |
| 6. | Orthodontics | 18.0406 |
| 7. | Pedodontics | 18.0407 |
| 8. | Periodontics | 18.0408 |
| 9. | Prosthodontics | 18.0409 |
| 10. | Dentistry, Other | 18.0499 |
| 11. | Dental Aide | 17.0101 |
| 12. | Dental Assisting | 17.0102 |
| 13. | Dental Hygiene | 17.0103 |
| 14. | Dental Laboratory Technology | 17.0199 |
| 15. | Dental Services, Other | 18.17 |
| 16. | Pre-Dentistry | |
| C. | Nursing | 18.11 |
| 1. | Nursing, General | 18.1101 |
| 2. | Anesthetist | 18.1102 |
| 3. | Maternal/Child Health | 18.1103 |
| 4. | Medical Surgical | 18.1104 |
| 5. | Nursing Administration | 18.1105 |
| 6. | Psychiatric/Mental Health | 18.1106 |
| 7. | Public Health | 18.1107 |
| 8. | Geriatric Aide | 17.0601 |
| 9. | Nursing Assisting | 17.0602 |
| 10. | Obstetrical Technology | 17.0603 |
| 11. | Pediatric Aide | 17.0604 |
| 12. | Practical Nursing | 17.0605 |
| 13. | Ward Service Management | 17.0606 |
| 14. | Nursing, Other | 18.1199 |
| 15. | Nursing-Related Services, Other | 17.0699 |

| | | CIP CODE |
|---|---|---|
| D. | Allied Health | |
| 1. | Audiology and Speech Pathology | 13.01 |
| | a. Audiology | 13.0101 |
| | b. Speech Pathology | 13.0102 |
| | c. Speech Pathology/Audiology | 13.0103 |
| | d. Audiology and Speech Pathology, Other | 13.0199 |
| 2. | Basic Clinical Health Sciences | 13.02 |
| | a. Clinical Anatomy | 13.0201 |
| | b. Clinical Biochemistry | 13.0202 |
| | c. Clinical Microbiology | 13.0203 |
| | d. Clinical Pathology | 13.0204 |
| | e. Physiology | 13.0205 |
| | f. Basic Clinical Health Sciences, Other | 13.0299 |
| 3. | Bioengineering and Biomedical Engineering | 14.05 |
| 4. | Biomedical Equipment Technology | 15.0401 |
| 5. | Biometrics and Biostatistics | 26.0602 |
| 6. | Chiropractic | 13.03 |
| 7. | Diagnostic and Treatment Services | 17.02 |
| | a. Cardiopulmonary Technology | 17.0201 |
| | b. Dialysis Technology | 17.0202 |
| | c. Electrocardiograph Technology | 17.0203 |
| | d. Electroencephalograph Technology | 17.0204 |
| | e. Emergency Medical Technology--Ambulance | 17.0205 |
| | f. Emergency Medical Technology--Paramedic | 17.0206 |
| | g. Medical Radiation Dosimetry | 17.0207 |
| | h. Nuclear Medical Technology | 17.0208 |
| | i. Radiograph Medical Technology | 17.0209 |
| | j. Respiratory Therapy Technology | 17.0210 |
| | k. Surgical Technology | 17.0211 |
| | l. Ultrasound Technology | 17.0212 |
| | m. Diagnostic and Treatment Services, Other | 17.0299 |
| 8. | Emergency/Disaster Science | 13.05 |
| 9. | Epidemiology | 13.06 |
| 10. | Health Sciences Administration | 13.07 |
| | a. Health Care Administration | 13.0701 |
| | b. Health Care Planning | 13.0702 |
| | c. Medical Records Administration | 13.0703 |
| | d. Health Sciences Administration, Other | 13.0799 |
| 11. | Hematology | 13.08 |
| 12. | Medical Laboratory | 13.09 |

| | | CIP CODE |
|---|---|---|
| 13. | Medical Laboratory Technologies | 17.03 |
| | a. Blood Bank Technology | 17.0301 |
| | b. Chemistry Technology | 17.0302 |
| | c. Clinical Animal Technology | 17.0303 |
| | d. Clinical Laboratory Aide | 17.0304 |
| | e. Clinical Laboratory Assisting | 17.0305 |
| | f. Cytotechnology | 17.0306 |
| | g. Hematology Technology | 17.0307 |
| | h. Histologic Technology | 17.0308 |
| | i. Medical Laboratory Technology | 17.0309 |
| | j. Medical Technology | 17.0310 |
| | k. Microbiology Technology | 17.0311 |
| | l. Medical Laboratory Technologies, Other | 17.0399 |
| 14. | Mental Health/Human Services | 17.04 |
| | a. Alcohol/Drug Abuse Specialty | 17.0401 |
| | b. Community Health Work | 17.0402 |
| | c. Genetic Counseling | 17.0403 |
| | d. Home Health Aide | 17.0404 |
| | e. Medical Social Work | 44.0702 |
| | f. Mental Health/Human Service Assisting | 17.0405 |
| | g. Mental Health/Human Services Technology | 17.0406 |
| | h. Rehabilitation Counseling | 17.0407 |
| | i. Therapeutic Child Care Work | 17.0408 |
| | j. Mental Health/Human Services, Other | 17.0499 |
| 15. | Ophthalmic Services | 17.07 |
| | a. Ophthalmic Dispensing | 17.0701 |
| | b. Ophthalmic Laboratory Technology | 17.0702 |
| | c. Ophthalmic Medical Assisting | 17.0703 |
| | d. Optometric Assisting | 17.0704 |
| | e. Optometric Technology | 17.0705 |
| | f. Orthoptics | 17.0706 |
| | g. Ophthalmic Services, Other | 17.0799 |
| 16. | Optometry | 18.12 |
| 17. | Pharmacy | 18.14 |
| 18. | Pre-Pharmacy | 18.19 |
| 19. | Podiatry | 18.15 |
| 20. | Population and Family Planning | 18.16 |
| 21. | Prosectorial Science | 18.21 |
| 22. | Public Health Laboratory Science | 18.22 |
| 23. | Rehabilitation Services | 17.08 |
| | a. Art Therapy | 17.0801 |
| | b. Corrective Therapy | 17.0802 |

| | | CIP CODE |
|---|---|---|
| c. | Dance Therapy | 17.0803 |
| d. | Exercise Physiology | 17.0804 |
| e. | Manual Arts Therapy | 17.0805 |
| f. | Music Therapy | 17.0806 |
| g. | Occupational Therapy | 17.0807 |
| h. | Occupational Therapy Assisting | 17.0808 |
| i. | Occupational Therapy Aide | 17.0809 |
| j. | Orthotic/Prosthetic Assisting | 17.0810 |
| k. | Orthotics/Prosthetics | 17.0811 |
| l. | Orthopedic Assisting | 17.0812 |
| m. | Physical Therapy | 17.0813 |
| n. | Physical Therapy Aide | 17.0814 |
| o. | Physical Therapy Assisting | 17.0815 |
| p. | Recreational Therapy | 17.0816 |
| q. | Recreational Therapy Technology | 17.0817 |
| r. | Respiratory Therapy | 17.0818 |
| s. | Respiratory Therapy Assisting | 17.0819 |
| t. | Speech/Hearing Therapy Aide | 17.0820 |
| u. | Speech-Language Pathology/Audiology | 17.0821 |
| v. | Therapeutic Recreation Aide | 20.0607 |
| w. | Rehabilitation Services, Other | 17.0899 |
| 24. | Toxicology (Clinical) | 18.23 |
| 25. | Miscellaneous Allied Health Services | 17.05 |
| a. | Animal Technology | 17.0501 |
| b. | Biomedical Communicator | |
| c. | Biomedical Photographer | |
| d. | Biomedical Writing | |
| e. | Central Supply Technology | 17.0502 |
| f. | Medical Assisting | 17.0503 |
| g. | Medical Illustrating | 17.0504 |
| h. | Medical Office Management | 17.0505 |
| i | Medical Records Technology | 17.0506 |
| j. | Pharmacy Assisting | 17.0507 |
| k. | Physician Assisting--Primary Care | 17.0508 |
| l. | Physician Assisting--Specialty | 17.0509 |
| m. | Podiatric Assisting | 17.0510 |
| n. | Veterinarian Aide | 17.0511 |
| o. | Veterinarian Assisting | 17.0512 |
| p. | Ward Clerk | 17.0513 |
| q. | Miscellaneous Allied Health Service, Other | 17.0599 |
| 26. | Allied Health, Other | 17.99 |
| 27. | Health Sciences, Other | 18.99 |
| | Medical Science Writing | |

# APPENDIX C

HEALTH REGULATORY BOARDS

## SECTION 1

### Overview of Regulation of the Health Professions and Occupations

The following overview is based on information provided by Richard D. Morris, Policy Analyst, Virginia Department of Health Regulatory Boards.

A. Virginia's law: See Code of Virginia, Chapter 29, Section 54

B. Purpose

Quote from Code of Virginia, Chapter 29, Section 54-1.17 "... the right of every person to engage in any lawful profession, trade or occupation of his choice is clearly protected by both the Constitution of the United States and the Constitution of the Commonwealth of Virginia. The Commonwealth cannot abridge such rights except as a reasonable exercise of its police powers when it is clearly found that such abridgement is necessary for the preservation of the health, safety and welfare of the public."

The decision to regulate a health occupation or profession is made by the Virginia General Assembly only when there is clear documentation that unregulated practice would harm the public. Virginia's laws governing the regulated health occupations and professions are set forth in Code of Virginia Chapter 29, Section 54.

Each regulated group is served by a board appointed by the Governor. The regulatory boards establish policies governing entry requirements (educational, experiential, and by examination), standards of conduct, and professional discipline. Any member of the public may make a complaint against a regulated practitioner. Complaints are investigated by the Department of Health Regulatory Boards. Sanctions appropriate to any breach of public trust are determined by each board and may include revocation of license to practice, probation, or other disciplinary actions.

1. Consumer Protection

The Virginia Department of Health Regulatory Boards regulates certain health professions to reasonably protect public health, safety, and welfare. The ten boards included in the agency are Dentistry, Funeral Directors and Embalmers, Medicine, Nursing, Optometry, Pharmacy, Professional Counselors, Psychology, Social Work, and Veterinary Medicine.

Health professional boards regulate more than 100,000 health care practitioners in Virginia. The boards set licensing and initial competency standards, resolve complaints, discipline practitioners when appropriate, and conduct studies of major issues in health professional regulation.

2. Initial Competency

The Commonwealth sets entrance standards for those seeking licensure or certification to practice a health profession in Virginia.

These standards typically include graduation from an approved school or institution and the passing of a written examination. Some boards also require applicants to pass a clinical examination. A license or certificate is granted to an applicant who meets these entrance requirements. The license/certificate may be renewed on a regular basis providing that continued competency is maintained and that laws and regulations that protect the public are not violated.

3. Professional Discipline

The boards have the responsibility to ensure that all health professionals provide quality care and comply with the laws governing their professions. All boards possess legal authority to discipline negligent, incompetent, and unprofessional practitioners, including the power to revoke and suspend licenses and to require remedial education.

4. Complaint Resolution

Consumers who believe they have been harmed or have been the victims of fradulent practice by a health professional are encouraged to inform this agency of their complaint. Valid complaints are investigated by a professionally trained staff. The findings of investigations are reviewed by the appropriate board for possible disciplinary action. Complaints may be made by calling Toll Free 1-800-533-1560 or by writing the Department of Health Regulatory Boards. Complainants receive written summaries of board findings.

5. Incompetent Practitioners

Major emphasis is placed on the identification of those practitioners who suffer from drug or alchol problems. Allegations of sexual misconduct are investigated discreetly and with sensitivity. Suspected criminal activity is referred to appropriate law enforcement authorities for prosecution. Practitioners who pose an imminent danger to the public are subject to immediate suspension from practice.

C. Public Participation in Regulation

1. Public Participation

Public hearings are conducted to review the laws and regulations governing health professionals. The public is invited to submit oral and written comments and attend these hearings. Information regarding thes hearings may be obtained from the individual boards and the Virginia Register of Regulations.

2. Citizen Involvement

The Commission of Health Regulatory Boards, which consists both of public and health professional members, was established by the General Assembly to facilitate citizen involvement in health professional regulation. The Commission conducts research and

fact-finding studies, reviews and comments upon all regulations proposed by each board, and provides recommendations to the Governor and General Assembly on the need to regulate various professions and occupations not currently regulated in Virginia. The staff of the Department analyzes regulations and assists the Commission and the ten boards in evaluating consumer, professional, and business concerns.

D. Virginia Department of Health Regulatory Boards

The Virginia Department of Health Regulatory Boards was created by the Virginia General Assembly in 1977 to provide centralized administrative support to the ten health regulatory boards. The Department operates with a staff of 55-60 persons including 18-20 field investigators who investigate complaints against regulated practitioners. Each board office is housed in the Department and staffed by an executive director and support personnel.

E. Virginia Commission of Health Regulatory Boards

The Virginia Commission of Health Regulatory Boards was also established in 1977 to provide for coordination of regulatory and administrative policy common to all boards. Commission members are appointed by the Governor. One representative from each of the ten boards and four citizen members comprise the membership. The Commission is advisory to the Department, the Governor, and the General Assembly in all matters of health occupational regulation, including evaluation of all proposals for new or expanded regulatory programs.

F. Methods of regulation of health care providers

1. Registration: Under this type of regulation, any person may engage in an occupation, but he or she is required to submit information concerning the location, nature, and operation of the practice. Registration is not a common form among health care providers since most present a clear risk to the public and require more strict regulation.

2. Statutory Certification: As a form of regulation, certification recognizes persons who have met certain educational and experience standards to engage in an occupation; only those who are certified may use the occupational title. The certification of nurse practitioners and respiratory therapists exemplifies this type of regulation. Certification is also a common form of recognition granted by private organizations, for example A.C.S.W. refers to social workers who are certified by the American College of Social Work.

3. Licensure: Under this method of regulation, it is illegal for anyone to engage in an occupation without a license, and only persons who possess certain qualifications are licensed. Physicians are one of more than 60 occupational groups regulated by licensure in Virginia.

## Section 2

The following tables are extracted from Report of the Task Force on Regulatory Review of the Virginia Commission of Health Regulatory Boards to the Governor's Regulatory Reform Advisory Board, May 1985.

Table A -- Regulated Professions

Table B -- Educational Requirements

Table C -- Examination Requirements

Table D -- Reciprocity Arrangements

These tables were prepared for a comprehensive review of the regulations of all health regulatory boards in 1985. The regulations proposed by each board have yet to be adopted by the boards. The process of adoption of proposed regulations should be complete by mid-1986

# TABLE A

## Regulated Professions and Occupations and Methods of Regulation

Board of Dentistry . . . . . A-1
(dentists, dental hygienists, dental assistants, dental laboratories)

Board of Funeral Directors and Embalmers . . . . . A-1
(funeral service licensees, funeral directors, embalmers, resident trainees, funeral service establishments)

Board of Medicine . . . . . A-2
(physicians, osteopathic physicians, chiropractors, podiatrists, acupuncturists, physical therapists, physical therapy assistants, physician assistants, clinical psychologists, naturopaths)

Board of Nursing . . . . . A-3
(registered nurses, licensed practical nurses, nursing education programs)

Certified Nurse Practitioners . . . . . A-4

Board of Optometry (optometrists) . . . . . A-5

Board of Pharmacy . . . . . A-5
(pharmacists, dispensing physicians, pharmacies, drug manufacturers, wholesalers/distributors, cosmetic manufacturers, humane societies/ animal shelters, hospitals/nursing homes/other facilities with pharmacies, correctional institutions, industrial infirmaries, college infirmaries)

Board of Professional Counselors . . . . . A-7
(professional counselors, marriage and family counselors, pastoral counselors, rehabilitation counselors, substance abuse counselors, career counselors, research counselors)

Board of Psychology . . . . . A-8
(psychologists, clinical psychologists, industrial/organizational psychologists, academic/research psychologists, counseling psychologists, technical assistants)

Board of Social Work . . . . . A-9
(licensed social workers, licensed clinical social workers, registered social workers, associate social workers)

Board of Veterinary Medicine . . . . . A-9
(veterinarians, animal technicians, animal facilities, veterinary medical students)

NOTE: These tables were prepared for a comprehensive review of the regulations of all health regulatory boards completed in 1985. The regulations proposed by each board have yet to be adopted by the boards. The process of adoption of proposed regulations should be complete by mid-1986

TABLE A

REGULATED PROFESSIONS, OCCUPATIONS, AND OTHER ENTITIES AND METHODS OF THEIR REGULATION, BY BOARD

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS STATUTORY REFERENCES |
|---|---|---|---|---|---|
| DENTISTRY | | | | | |
| 4,200 Dentists | Dentists | Licensure | Same | Same | §§54-146 to 54-200.23, Dentists and Dental Hygienists |
| 1,900 Dental Hygienists | Dental Hygienists | Licensure | Same | Same | §§54-200.1 to 54-200.23 are specific to dental hygienists |
| 4,800 Dental Assistants (Who perform x-rays) | Not credentialed, but regulations define duties assistants may and may not perform under supervision. Assistants are certified for x-ray if they meet certain standards. | | Same | Same | |
| 166 Dental Laboratories | Not credentialed, but regulations prescribe what dentists must include in work orders given to laboratories. | | Same | Same | §54-147.2 restricts advertising by dental laboratories; defines misdemeanor offenses. §54-167 makes laboratories subject to inspection by Board. |
| FUNERAL DIRECTORS AND EMBALMERS | | | | | |
| 1,056 Funeral Service Licensees | Funeral Service Licensees | Licensure | Same | Same | §§54-260.64 to 54-260.75 Funeral Service Laws of Virginia; §11-24 et seq., preneed burial contracts; §32.1-249 et seq., health requirements. |
| 412 Funeral Directors | Licensure renewals only; licensure program closed | Licensure | Same | Same | |
| 32 Embalmers | Licensure renewals only; licensure program closed | Licensure | Same | Same | |
| 215 Resident Trainees | Trainees | Registration | Same | Same | §54-260.72 |
| 490 Funeral Service Establishments | Establishment | Registration and Permit | Same | Same | §54-260.73 |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| Funeral Directors and Embalmers (continued) | | | | | |
| | --- | --- | NEW: Suface Transportation and Removal Services | Registration and Permit | §54-260.74.1, enacted 1984 |
| MEDICINE | | | | | |
| 16,859 Physicians | Same | Licensure | Same | Same | (Title 54, Chapter 12 generally: §§54-273 to 54-325.15) |
| 175 Osteopathic-Physicians | Same | Licensure | Same | Same | |
| 341 Podiatrists | Same | Licensure | Same | Same | |
| 28 Acupuncturists (included in above three categories) | Same | Licensure | Same | Same | §54-274.1 |
| 400 Chiropractors | Same | Licensure | Same | Same | §54-279 |
| 634 Clinical Psychologists | Same | Licensure | Same | Same | §54-309.1 (See Board of Psychology and Narrative) |
| 1,428 Physical Therapists | Same | Licensure | Same | Same | §§54-281.1 to 54-281.2; 54-295.1 to 54-295.6; §54-308.5 to 54-308.7 |
| 184 Physical Therapist Assistants | Same | Licensure | Same | Same | |
| 160 Physicians' Assistants | | | | | |
| Category I | Same | Certification | Same | Same | §§54-281.4 to 54-281.9 |
| Category II | Same | Certification | Same | Same | Board has accepted Task Force recommendations to retitle "Physician's Assistant I" as Physician Assistant I and to redesignate Physician Assistant II to lessen confusion of these differently trained occupational classes. |
| 3 Naturopaths (licensed prior to 6/30/80) | Same | Licensure | Same | Same | §54-274 |
| 20 Foreign Practitioners teaching in medical schools | Same | University Limited License | Same | Same | §§54-311.1 and 54-311.2 |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| MEDICINE (Continued) | | | | | |
| | | | New: Foreign Medical schools and other foreign institutions that teach the healing arts | Approval | §54-306.1:2, enacted 1985 |
| NURSING | | | | | |
| 49,988 Registered Nurses | R.N. | Licensure | Same | Same | §§54-367.1 to 54-367.36 |
| 20,523 Licensed Practical Nurses | L.P.N. | Licensure | Same | Same | |
| 89 Nursing Education Programs | Programs | Accreditation | Same | Approval | §54-367.11, 54-367.27 and 54-367.28 call for "accreditation"; §54-367.29 for "approval." Report notes that approval is correct term and that Board will seek changes needed in statute. Accreditation is appropriate term used to describe recognition given by a private organization. |
| NURSE PRACTITIONERS | | | | | |
| 1,340 Certified Nurse Practitioners | CNPs in the following categories:<br>1) Adult Nurse Practitioner Health Care<br>2) Family Nurse Practitioner<br>3) Pediatric Nurse Practitioner<br>4) Family Planning Nurse Practitioner<br>5) Ob/Gyn Nurse Practitioner<br>6) Emergency Room Nurse Practitioner<br>7) Geriatric Nurse Practitioner<br>8) Certified Nurse Anesthetist Practitioner<br>9) Certified Nurse Midwife Practitioner | Certification | Same, plus an additional category: Women's Health Care Practitioner (2.2.A) | Same | These regulations are promulgated under the specific authorization of one paragraph of the five-paragraph §54-274 of the Code:<br><br>"Nothing in this chapter shall prohibit, limit, restrict, or prevent the rendering of any medical or health services by a registered nurse or a licensed practical nurse under the supervision of a duly licensed physician; provided, however, that such services are authorized by rules and regulations jointly promulgated by the Virginia State Board of Medicine and the |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| NURSE PRACTITIONERS (Continued) | | | | | |
| 1,340 Certified Nurse Practitioners | 10) School Nurse Practitioner<br>11) Medical Nurse Practitioner<br>12) Maternal Child Health<br>13) Neonatology Nurse Practitioner | | | | Virginia State Board of Nursing, which boards shall be jointly responsible for the implementation thereof." |
| | Other categories may be determined by the Board. (Regulations, Section III) | | Same (§2.2.B.) | | |
| | Nurse Practitioner Educational Programs | Approval | Same | Same | |
| OPTOMETRY | | | | | |
| 901 Optometrists | Same | Licensure | Same | Same | §§54-368 to 54-398.02: terms "certificate" and "license" used alternately throughout. |
| 393 "Licensed optometrists authorized to use diagnostic pharmaceutical agents" | Same | Certification | Same | Same | §§54-386.1 and 54.386.2 enacted 1983: First section requires certification by Board to administer such agents. Second identifies the agents and maximum strengths that may be used, and makes use without certification a punishable offense. |
| PHARMACY | | | | | |
| Pharmacists | Same | Licensure | Same | Same | §54-524.21 |
| Dispensing Physicians | Same | Licensure | Same | Same | §54-524.34:1 |
| Pharmacies | Same | Permit | Same | Same | §54-524.31 |
| Drug Manufacturers | Same | Permit | Same | Same | §§54-524.36, 54-524.40, & 54-524.41:1,:2 |
| Wholesalers/Distributors | Same | Permit | Same | Same | §54-524.44 |
| Cosmetics Manufacturers | Same | Permit | Same | Same | §§54-524.36, 54-524.40, & 54-524.41:1,:2 |
| Human Societies/ Animal Shelters | Same | Licensure | Same | Same | §54-524.47:1 |
| Hospitals, Nursing Homes, & Skilled Care Facilities having Pharmacies | Same | Permit for Pharmacy | Same | Same | |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| PHARMACY (Continued) | | | | | |
| Correctional Institutions | Same | Regulations for administering and storing drugs and for records | Same | Same | |
| Industrial Infirmaries and First Aid Rooms | Same | As above | Same | Same | |
| College Infirmaries | Same | As above | Deleted | Deleted | |
| PROFESSIONAL COUNSELORS | | | | | |
| 968 Professional Counselors | Professional Counselors Specialties | Licensure (Generic) | Same | Same | §54-933 and 54-935 covers powers and duties of professional counselors; §54-934.1 authorizes Substance Abuse Committee; separately, §54-929 authorizes board "to promulgate regulations necessary to administer effectively the regulatory system administered by the professional board." See narrative related to specialty designations. Task Force recommends eventual generic licensure with specialty designation left to private sector credentialing. |
| Certification | Marriage and Family | Licensure | Same | Same | |
| | Pastoral | Licensure | Same | Same | |
| | •Rehabilitation | Licensure | Same | Same | |
| | •Substance Abuse | Licensure | Same | Same | Both existing and proposed regulations treat substance abuse counselors as specialty for professional counselor licensing, but in other sections these counselors are in separate list for certification by special committee (see below). This is intended. Generically licensed professional counselors may be additionally licensed as substance abuse counselors; others may be certified substance abuse counselors. |
| | •Career | Licensure | Eliminated | --- | |
| | •Research | Licensure | Eliminated | --- | |
| | | | NEW | | |
| | | | Clinical Mental Health Counselor | Licensure | See narrative related to specialty designation. |

(Continued)

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| PROFESSIONAL COUNSELORS (Continued) | | | | | |
| Substance Abuse Certification Committee | (Substance Abuse counselors regulated by special committee) | Certification | Same | | |
| 182 Alcholism Counselors | Same | Certification | Same | Same | Special Committee proposed to be disbanded and function absorbed by Board. This will require change in statute. |
| 54 Drug Counselors | Same | Certification | Same | Same | |
| PSYCHOLOGY | | | | | |
| 284 Psychologists (generic) | Same | Licensure | Same | Same | §54-924; 54-928; 54-929, 54-931, 54-936 through 54-939.1, 54-950 and 54-950.2. In addition, §54-929a provides for Board "to promulgate regulations" etc., as for Board of Professional Counselors, above. |
| | Same | Licensure | Same | Same | |
| In addition, Clinical Psychologists are examined by Board of Psychology and recommended for licensure by Board of Medicine | Clinical Psychologist | Licensure | Same | Same | Statutory changes proposed to eliminate dual board governance of clinical psychology (i.e., to regulate solely by Board of Psychology). Task Force concurs. |
| | Industrial/Organizational Psychologist | Licensure | Proposed regulations eliminate all but School Psychologist and generic license, collapsing previous specialties into "Health Service Provider" and "Nonhealth Service Provider" | | The Task Force concurs with the Board that specialty licensing should be eliminated and School Psychologist category continued (perhaps as registration or certification vs. licensure program). |
| | Academic/Research Psychologist | Licensure | | | |
| | Counseling Psychologist | Licensure | | | |
| | Technical Assistants | Registration | Same | Same | Task Force recommends further study of the need to regulate this occupation. |
| SOCIAL WORK | | | | | |
| 230 Licensed Social Workers | LSW | Licensure | Same | Same | Task Force recommends study of licensing specialties further of casework and group work and of method of regulating LSWs (i.e., by registration or certification vs. licensure). |
| Licensed Clinical 784 Social Workers | LCSW | Licensure | Same | Same | |
| | Casework | Specialty License | Same | Same | |
| | Group work | Specialty License | Same | Same | |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS Regulated Entity | Method | PROPOSED REGULATIONS Entity | Method | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|---|---|
| SOCIAL WORK (Continued) | | | | | |
| 431 Registered Social Workers | RSW | Registration | Same | Same | |
| 25 Associate Social Workers | ASW | Registration | Same | Same | |
| VETERINARY MEDICINE | | | | | |
| 1,617 Veterinarians | Veterinarians | Licensure | Same | Same | §§54-766 to 54-786.8 |
| 363 Animal Technicians | Animal Technicians | Certification | Same | Same | Also related statutes of the Drug Control Act (§§54-524.47:1--54-524.94) |
| 403 Animal Facilites | Animal Facility | Registration and Permit | Same | | |
| Veterinary Medicine Students | Students | Preceptorship | Same | Same | |

(Continued)

# TABLE B

## Educational or Other Entry Requirements, by Board

(For professions or occupations regulated by each board, see Table A.)


Board of Dentistry . . . . . B-1

Board of Funeral Directors and Embalmers . . . . . B-2

Board of Medicine . . . . . B-3

Board of Nursing . . . . . B-8

Certified Nurse Practitioners . . . . . B-10

Board of Optometry . . . . . B-11

Board of Pharmacy . . . . . B-11

Board of Professional Counselors . . . . . B-12

Board of Psychology . . . . . B-13

Board of Social Work . . . . . B-15

Board of Veterinary Medicine . . . . . B-16

NOTE: These tables were prepared for a comprehensive review of the regulations of all health regulatory boards completed in 1985. The regulations proposed by each board have yet to be adopted by the boards. The process of adoption of proposed regulations should be complete by mid-1986.

TABLE B

EDUCATIONAL OR OTHER ENTRY REQUIREMENTS FOR REGULATED PROFESSIONS OR OCCUPATIONS, BY BOARD

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| DENTISTRY | | | |
| Dentists | Education: | Education: | |
| | Graduate of dental school recognized by Council for Dental Education of American Dental Association and by Board (4.C.1.a.) | Graduate of dental school recognized by Commission on Dental Accreditation of ADA, with D.D.S. or D.M.D degree; | Graduate of a "professionally accredited and reputable" dental school–board determines which schools are such, |
| | | or | or |
| | | for foreign graduate, a degree or certificate from a post-doctoral program approved by Commission (2.1.A.) | for person practicing abroad five years prior to applying; must have proof of graduation from such a school (§54-170). |
| | Other: | Other: | |
| | Certificates "of good moral character" from two dentists (4.C.1.c) | "Moral character " reference deleted. | Applicant "must be of good moral character. . ." (§54-170). Report contains no proposal to delete this requirement from Code. |
| | Pass National Board of Dental Examiners' exam before applying to Board (4.C.1.d.3.). before applying to Board | Pass Parts I & II of Joint on National Dental CommissionExaminers' exams applying to Board (2.2.A.1). | Any exams "shall be of such character as to test the qualifications of the applicant . . ." (§54-171). |
| | Must pass Southern Regional Testing Agency (SRTA) examination as precondition for licensure | Same | Board uses SRTA regional examination to supplement national examination program. |
| Dental Hygienists | Education: | Education: | |
| | •Graduate of school of dental hygiene recognized by ADA Council on Dental Education and by Board (4.C.2.e.) | Graduate of school of dental hygiene recognized by ADA Commission on Dental Accreditation (2.1.B.). | |
| | Other: Certificates "of good moral character" from two dentists (4.C.2.c.) | Other: "Moral character"reference deleted | Must be "of good moral character . . ." (§54-200.9). Report contains no proposal to delete this requirement from Code. |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| DENTISTRY (continued) | | | |
| Dental Hygienists (continued) | Pass National Board of Dental Examiners' exam before applying (4.C.2.d.3). | Pass Joint Commission on National Dental Examiners' exam before applying (2.1.C.3.). | Board to determine type of any exams given (§54-200.4). |
| | Must pass Southern Regional Testing Agency (SRTA) examination as precondition for licensure. | Same | Board uses SRTA regional examination to supplement national examination program. |
| FUNERAL DIRECTORS AND EMBALMERS | | | |
| Funeral Service Licensees | Education:<br>Graduate of mortuary science program [XI.1.(a)]<br>Completion of two-year traineeship [XI.1 (e)] | Same (3.4.A.1)<br>Same (3.4.S.5) | §54-260.70 prescribes all five present entry requirements (listed in existing regulations) for applicants for licenses. |
| | Experience:<br>Participation in arrangement for and conduct of at least 25 funerals.<br>Emblamed at least 25 human bodies [XI.1.9(e)]. | Same (3.4.A.5.a) | |
| | Other:<br>Three citizens' notarized statements of applicant's good moral character [XI.1.(c)]. | Three citizens' notarized statements as character reference ("good moral character" deleted) (3.4.A.3.) | Statute specifies "of good moral character." Board Report proposes no change in Code to delete this re quirement. |
| | Pass exam of National Conference of Funeral Service Examining Boards or the National State Board Exam administered by Virginia Board (X.9.). | Same (3.2.A. & B.) | |
| | After submitting application, must receive certification from Virginia Board that he/she is qualified to take its exam. (IX.2.) | Same (3.4.B.) | |
| Resident Trainees | Education: | Education: | |
| | Graduate of high school or §54-260.72 prescribes all present entry requirements | Same (5.2.A.) equivalent (XIII.2.) (listed in existing regulations) for applicants for traineeships. | |
| | Other: | Other: | |
| | Three citizens' notarized statements of applicant's "good moral character" (XIII.2.) | Three citizens' notarized statements as character reference ("Moral character" reference deleted) (5.2.B.3) No felony convictions (5.2.A.) | Statute specifies "of good moral character." Report proposes no change in Code to delete this requirement or to add felony conviction. |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| FUNERAL DIRECTORS AND EMBALMERS (Continued) | | | |
| Resident Trainees (continued) | Training program, licensee who will supervise it, and funeral establishment where it will be conducted, must be approved by Board in advance (XIII.4-7.). | Same (5.3 and 5.4) | |
| MEDICINE | | | |
| A. Students of American Institutions: | | | |
| Physician | | All applicants in Medicine, Osteopathy, Poidatry & Chiropractic: complete chronology of professional activcities since graduation §2.2.A.4) | •All in Medicine, Osteopathy, Podiatry, and Chiropractic: --1 year post-graduate training in U.S. or Canadian hospital recognized by professional association [§54.305.(d)] |
| | | Graduate of medical school approved or accredited by Liaison Committee on Medical Education or other accrediting body recognized by American Medical Association (AMA) or by Committee for the Accreditation of Canadian Medical Schools or its appropriate subsidiary agenices (2.2.A.2.b.) | Completion of all, or such part as Board prescribes, of a course of study in the branch of the healing arts in which applicant seeks to be licensed--the course and the educational institution providing it to be acceptable to the Board [54-305.(c)]. |
| | | | Good moral character [§54-305.j(b)] |
| Osteopathy | --- | Graduate of college of osteopathic medicine approved or accredited by Committee on Colleges and Bureau of Professional Education of American Osteopathic Association (2.2.A.2.b.) | |
| Podiatry | Graduate of school of podiatry approved and recommended by Council on Podiatry Education of American Podiatry Association (3.4.A.) | Same (2.2.A.2.c.) | |
| Acupuncture | License in medicine, osteopathy or podiatry & 100 hrs. postgraduate training in a school of acupuncture approved by the Board. No Board exam specified. Registration to practice acupuncture is specified. (1.1) | Same prerequisites but licensure specified instead of registration. No Board exam (4.2.B.1.-3) | §54.274.1 Clarification of method of credentialing (licensure or registration) needed. |
| (Continued) | | | |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | | | |
| Chiropractic | If matriculated after 7/1/75, graduate of chiropractic college approved by Commission on Accreditation of Council of Chiropractice Education. If before 7/1/71, graduate of chiropractic college approved by American Chiropractic Association or International Chiropractic Association (3.4.A.) | Same (2.2.A.2.d.) | |
| Clinical Psychology | Requirements of Virginia Board of Psychologist Examiners in separate regulations of that Board (3.1.A.) | Requirements of Virginia Board of Psychology in separate regu- of that Board (2.1.C.) | See Narrative on Board of Psychology. Task Force recommends elimination of dual system. |
| Physical Therapist | Not specified. Statute specifies graduate of school of physical therapy as in proposed regulations. | Graduate of school of physical therapy approved by Council on Medical Education of AMA or by American Physical Therapy Association (2.3.A.) | Education [§54-308.5 (e)] Good moral character [§54-308.5.(c)] |
| Physical Therapist Assistant | Not specified. Statute specifies as in proposed regulations (at right). | Graduate of two-year college-level educational program approved by Board of Medicine (2.3.B) | Education [§54-308.6. (a) (5)] Good moral character [§54-308.6.(a) (3)] |
| Physician Assistant -Category I (for private employment) | Be of good moral character & "shall have the burden of proving that he is . . ." (III) | Deleted | §54-281.4 (a) & (b) |
| | Course of study in a curriculum approved & accredited by Committee on Allied Health Education and Accreditation of AMA or other accrediting agencies approved by Virginia Board. (IX.1) | Prescribed curriculum in a school or institution accredited by the Committee (2.3.A)<br><br>Present evidence of eligibility for exam of National Commission on Certification of Physician Assistants (NCCPA). (2.3.B.) | See notes related to re-naming this profession Physician Assistant (vs. physician's assistant) in Table A. |
| | Regulations distinguish in <u>some</u> instances "Physicians' Assistants" (implied to mean assistants to a doctor of medicine or osteopathy) & "Podiatrist's Assistant":<br>•Former must pass Primary Care qualifying exam of National Commission for Certification of Physician Assistants [IX.2. ( a)] and , if specialize, pass specialty exam as such <u>exams become available</u> [IX.2 (b)]<br>•Podiatrists' Assistants must: Pass exam by Examining Board of American Society of Podiatric Assistants (IX.3); | Distinction not made. | §54-281.7 |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | | | |
| Physician Assistant Category I (for private employment) (Continued) | Be proficient in English (XI.A.); and possess numerous enumerated skills (XI.B.-E.) | | |
| | Physician or podiatrist with whom assistant will work must apply to Board spelling out what the assistant will do, and obtain Board approval. (II.) | Essentially same (2.2.C.) | |
| Physician Assistant-- Category II (for employment by Dept. of corrections in its institutions | Three years' progressively responsible experience in a recognized medical organization or facility. Six months experience in medical or radiology lab may be substitued for six months of required three years. (II.A. & B.) Studies in an approved school, in armed services or maritime services and in colleges or universities in specified subjects may also be substituted. (III.A-C.) | Essentially same (2.2.A-C.) | §54-281.4.(c)<br><br>(See notes related to redesignation of this occupational class in Table A. Redesignation is desirable to lessen confusion of this differently trained occupation with Physician Assistant I's. |
| | Interview by supervising physician at correctional institution where the person makes application. | Same (4.1.A.) | |
| | Recommendation by Medical Director of Dept. of Corrections | Same except now "Chief Physician" of Dept. (4.1.B.) | |
| | Registration by Board of Medicine (III.) | Implicit in 4.1.B. | |
| B. Students of Foreign Institutions: | | | |
| Medicine, Osteopathy, Podiatry, and Chiropractic | Standards for Institutions aboard not included | All applicants in Medicine, Osteopathy, Podiatry, and Chiropractic: Institution attended must be one approved under new proposed Regulations §465-05-1 (2.2.A.3.a.) | §54-306.1:2, enacted 1985 |
| | Documentation of:<br>•Diploma (3.4.F.) | Documentation of:<br>•Attendance at institution's principal site at least two straight years and completion of at least half of degree requirements there [2.2.A.3.b.(1)]<br>Degree from institution [2.2.A.3.b.(2)] | §54-305(d) |
| | One year as hospital intern or intern or resident in U.S. or Canada (3.4.F) | Same [2.2.A.3.b. (3)] | |
| | Documents not in English to be translated by consul or professional translation service (3.4.H.) | Translation of documents [2.2.A.4.b.(2)] | |
| | Chronology of all professional activities since attended institution (3.4.G.) | Same [2.2.A.4.b (3)] | |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | If discharged from U.S. military in last 10 years, a notarized copy of discharge papers (3.4.I.) | Same (2.2.A.4.C.) | |
| Medicine and Osteopathy | Standard certificate of Educational Council of Foreign Medical Graduates (ECFMG) or equivalent; OR licensure by another state or Canadian province (3.4.A.) | Same (2.2.A.3.c.) | |
| Medicine (Exception) | None specified | Can take Board exams if:<br>• Completed all degree requirements except social services and post-graduate internship (2.2.A.3.d.)<br>• Completed clinical training program as established by AMA .[2.2.A.3.d. (2)]<br>• Completed postgraduate hospital training in U.S. or Canada [2.2.A.3.d. (3)]<br>• Certificate from foreign institution on work completed [2.2.A.3.d. (4)] | |
| Clinical Psychology | None specified | Regulations §465-05-1 also set standards for institutions in this field, for which Board of Psychology gives the exam. | |
| Physical Therapist | Meet Code §54-308.5 as for American institutions and:<br>•English proficiency [VI.6.(a)]<br>•Copy of certificate or diploma and translation if necessary OR certificate from school [VI.6.(b)]<br>•Evidence the curriculum is substantially equivalent to that approved by the AMA Council or American Physical Therapy Association. Board will accept verification by Credentials Evaluation Service of International Education Research Foundation or "some other" such service approved by Board [VI.6(c)] | Graduate of school with course (2.4.A.)<br>Same (2.4.B.1.)<br>Essentially the same (2.4.B.2. & 3.)<br><br>Same, except Board "may accept" verification by the Foundation's evaluation service or another (2.4.B.4) | |
| NURSING | | | |
| Graduates of U.S. Programs | | | |
| | Both existing and proposed regulations state entry requirements for all U.S. applicants--both R.N. and L.P.N.--in single statements applicable to both categories. | | Code uses separate sections for R.N. and for L.P.N. applicants. |
| Registered Nurse (R.N.) | Transcript from "nursing school" (5.1: 1.b) | Transcript from "nursing education program"(3.1.H.) | §54-367.13 specifies for R.N. license applicants:<br>(a) (implied for all R.N. applicants though not stated |
| Licensed Practical Nurse (L.P.N.) | Only reference to other entry requirements is in Section III on accreditation of programs, under 3.2:4 "Students": "Requirements for admission to the nursing program shall not be less than | Same (2.2.D.1.a.) | •four years of high school or equivalent;<br>•diploma or degree from accredited professional nursing education program;<br>•no acts that are grounds for |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATION | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| NURSING (Continued) | | | |
| Licensed Practical Nurse (L.P.N.) (Continued) | the statutory requirements which will permit the graduate to be admitted to the appropriate licensing examination" -- with a cross-reference to Code §54-367.13 (a) (2) and an explanation of what the equivalent of a four year high school course of study, referred to in Code, is considered to be. | | disciplinary action as listed in §54-357.32; and (b) (stipulating for foreign graduates) applicant "may be required to pass the Commission on Graduates of Foreign Nursing Schools Qualifying Examination." |
| Graduates of Foreign Programs | Existing regulations use the above device of a single statement applicable to all foreign applicants (no mention of R.N. or L.P.N.) to require:<br>• "Certification of Licensure" from the licensing or accrediting agency in country of nursing preparation [5.3.b.(2)]<br>• Official transcript verifying graduation from nursing program and, if not in English, an official English translation [5.3.b.(3)]<br>• Evidence of secondary education such as required for other applicants [5.3.b.(4)]<br>• Proficiency in English evidenced by score of 550 or above on TOEFL (Test of English as a Foreign Language) if English not the first language of applicant OR by passing Commmission on Graduates of Foreign Nursing Schools Qualifying Examination [5.3.b.(5) and 5.3.e. & g.]<br>• The nursing education program must have covered theory and clinical practice in five listed areas of nursing care (5.3.c.) or else the deficiencies be made up in a state-accredited school or Board-approved program (5.3.d.)<br>• Applicant "may be required" to pass Commission qualifying exam cited above (5.3.f.)<br>• Notarized "Form I" [5.3.b. (1)] | Proposed regulations use a blanket statement applicable to both R.N. and L.P.N. applicants for one set of requirments--then split into separate R.N. and L.P.N. 3.3.A.: Licensed applicants all must "meet the statutory qualifications for licensure," and verification of their qualifications will be based documents submitted as specified in 3.3.B. and 3.3.C.<br>3.3.B. (for R.N.s): Evidence of passing score on Commission of Graduates of Foreign Nursing School Qualifying Examination<br>3.3.C (for L.P.N.s):<br>-transcript from the nursing education program submitted directed to Board office;<br>-evidence of secondary education "to meet the statutory requirements";<br>-vertification-of-licensure form submitted directly to Board office by the credentialing agency in the country where licensed. | §54-367.19 probably single set of requirements applicable (no requirements for all L.P.N. license whether U.S. or foreign): specifications as follows:<br>• Completion of two years of high school or equivalent;<br>• diploma from an accredited practical nursing program;<br>• no acts grounds for disci- on plinary action as above |
| NURSING PRACTITIONERS (C.N.P.) | Virginia license as a registered nurse | Same (2.3.A.) | |
| | Completion of an approved program "designed to prepare nurse practitioners" | Completion of a program "designed to prepare nurse anesthetists, nurse midwives, or nurse practitioner that is":<br>-approved by Boards | |
| | "Where applicable," certification by an association recognized by the Boards | | |
| (Continued) | | | |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| NURSING PRACTITIONERS (C.N.P.) | (Regs. Section V) | OR<br>-accredited by an agency identified as one accepted by the Boards (2.3.C.)<br>Certification by an agency identified as one accepted by the Boards (2.3.C.)<br>Board will accept certification by examination by five listed national agencies (2.4- - the identification referred to in 2.3) | |
| OPTOMETRY | | | |
| Optometrists | Written exam of National Board adopted as written exam of Virginia Board, but Board may substitute own written exam. Applicant must also pass a practical exam by Virginia Board (VI.) | Same, except that reference to Board's discretionary use of its own written exam as substitute for national is deleted (2.1.A.) | §54-380 authorized Board to set standards for exams |
| Optometrists certified to prescribe diagnostic drugs | No mention: existing regulations predate the law. | Only mention of exam is in fee list. No mention of the prerequisite course, and no citing of §54-386.1. | §54-386.1 requires "a Board-administered, performance-based exam on general and ocular pharmacology" after successful completion of a Board-approved course of at least 55 classroom hours in three specified areas. The course must be one given by a college or university accredited by a body recognized or approved by the Council on Post-Secondary Accreditation or by the U.S. Department of Education. |
| PHARMACY | | | |
| | Graduate of 1 of 72 approved colleges of pharmacy listed by name (4.B., 8.A.-B.) | Same (2.4.A.-B.) | Good moral character<br>Graduate of School of Pharmacy approved by Board and defined as one meeting standards of American Council on Pharmaceutical Education and listed on its annual published list. (§54.524.21.)<br>Practical experience not to exceed 12 monthe (§54.524.21.) |
| | Six months (1,000 hrs.) practical experience in compounding and dispensing prescriptions in a pharmacy (2.A.-B., 6.C.) | Same (2.1.A.-B., 2.3.C) | |
| | • For students, after completion of first professional year in pharmacy school | Same (2.1.C.) | |
| | • "Student Externes" (2.C.) | | |
| | • For graduates--"Pharmacy Internes" (3.C.) | Same (2.2.C.) | |
| | • Registration with Board required in advanced except for students enrolled in a college clerkship program (3.A.,C.,F.) | Same (2.2.A.,C., F.) | |
| | • Under supervision of a pharmacist who may supervise only 1 externe or interne at same time (3.B.1. & D.) | Same (2.2.B.1 &D.) | |
| | • Practical experience in a college of pharmacy with program for such approved by American Council on Pharmaceutical Education may be substituted on equal time basis. (2.D.) | Same (2.1.D.) | |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| PHARMACY (Continued) | • Out-of-state interne experience to be certified by board of the other state (3.C.)<br>• For externe, affidavit to be filed with Board at end of experience as evidence of it (3.G.) | Same (2.2.C.)<br>Same (2.2.6) | |
| | --- | --- | |
| | Requirements for a nuclear pharmacist:<br>Meet Nuclear Regulatory Commission standards of training;<br>Be a licensed pharmacist in State;<br>90 contact hours didactic instruction in subject from accredited college of pharmacy;<br>160 hours clinical training in nuclear pharmacy or college; and<br>Submit affidavit of experience and training to Board. (13.1.A.-E) | Same (4.2.A.-E.) | |
| PROFESSIONAL COUNSELORS | | | |
| Professional Counselors (generic) | 60 semester hours (or 90 quarter hours) of graduate study that is primarily counseling in nature, including a graduate degree in counseling from a college or university accredited by SCHEV or regional agency. Specific coursework mandated. Criteria for equivalency broadly stated. | Same, except requirement for graduate degree or equivalent removed and specific course work requirement expanded from 9 to 10. Also, 4,000 hours (equivalent of two years) postgraduate or postpracticum required under supervision satisfactory to Board, including 200 hours of individual supervision, 100 of which may be met by group supervision on 2:1 basis. Postgraduate or postpracticum internship may count for one-half of 4,000-hour requirement. | Task Force recommends eventual removal of requirements except graduation from accredited school and/or successful completion of examination. |
| Specialty Licensure (Marriage and Family, Pastoral, Rehabilitation Career, Research, Mental Health Counselor) | Each require generic preparation as above plus special provisions for postgraduate course content and practicum supervised by licensee (or other) approved by Board. | Specialty Licensure for Research and Career Counselor discontinued,Marriage and Family and Pastoral specialty continued with essentially the same requirements | Task Force recommends eventual discontinuance of specialty licensure; specialty designation if any, to be left to private credentialing. |
| | --- | Mental Health Counselor specialty created with specific graduate and practicum requirements and Ph.D. in counseling or mental health counseling required by 1990. | See specialty recommendation above. |
| Substance Abuse Counselor | Person (not necessarily generic professional counselor) with specific educational and experience requirements (not necessarily degreed) | Substance Abuse Counselor continued, now to be regulated directly by Board (Certification Committee disbanded) with essentially the same requirement. | Task Force concurs.<br>See notes in Table A related to inconsistencies in referring to licensure and certification of substance abuse counselors. |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| PSYCHOLOGY | | | |
| Psychologist (generic) | Requires Ph.D. in psychology. | Board proposes to retain only generic license with doctoral degree and specific experiential requirements, and School Psychologist requiring Master's degree and specific experience. | Task Force concurs. |
| Clinical Psychologist | Required to be psychologist with competence in psychological evaluation and psychotherapy. | All other specialties collapsed into two: Health Service Provider, and Nonhealth Service Provider. Board also proposes returning Clinical Psychology from Board of Medicine to sole province of Board of Psychology. •Residencies for "Health Service Provider" reduced from two to one year; one-year internship remains. "Nonhealth Service Provider" must complete one-year full time residency. Board's specific requirements for educational content substantially reduced from 11 printed pages of highly specific requirements for graduate education content, internships, and residencies. | Task Force concurs with respect to Clinical Psychology. Further study of proposed "health provider", "non-health provider " recommended. Careful review of statutory and regulation changes to implement Board proposals is needed. |
| Psychologist (clinical) | Has identical requirements as for Clinical Psychologist, above. | | |
| Counseling Psychologist | | Required to be psychologist specializing in assessment and treatment of academic, vocational, marital, family, or personal adjustment, etc. | |
| School Psychologist | Person (not necessarily generic psychologist) specializing in "problems in educational systems who attempt to improve learning conditions for students." Master's degree and specific experiences required. | Essentially the same | Task Force recommends continuation, possibly as a certification or registration program (vs. licensure). |
| Industrial/Organizational Psychologist | Person (not necessarily generic psychologist) specializing in solution of problems arising in organizations. | Eliminated | Task Force concurs |
| Academic/Research Psychologist | Person (not necessarily generic psychologist) competent to instruct students. | Eliminated | Task Force concurs |
| Technical Assistants | Required to hold baccalaureate degree, with major in psychology. | Same | Task Force recommends further study. |
| SOCIAL WORK | | | |
| Licensed Social Workers (LSW.) | Two kinds: •Bachelor's degree (BSW) in social work from program accredited | There are no substantive changes in requirements, but Board report indicates | Task Force recommends consideration of LSW. program as certification or registration (vs. licensure). |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| SOCIAL WORK (Continued) | | | |
| Licensed Social Workers (LSW.) (Continued) | by Council on Social Work Education (CSWE) with special experience requirements (two-year post degree social work practice and 135 hours of supervision). | that "independent contractors shall be deemed to be in private practice and be licensed by the Board." Statutory change required and proposed. | Statutory authority to regulate (license) "independent contractors" is not clear. Task Force recommends further study. |
| | •Master's degree (MSW) from program accredited by CSWE; no experiential requirement. | Statutory change also proposed such that "Board will not register the supervision of persons obtaining experience in exempt settings, but these persons shall be expected to meet criteria for supervision in 2.2.B.2.b." | |
| Licensed Clinical Social Worker (LCSW) | Required to have three years full-time post-degree (MSW) experience in delivering clinical services. Doctoral degree in clinical social work may count as one of three years experience. Must have 200 hours supervision with weekly "face-to-face consultation" and other highly specific requirements. All experience must be in "non-exempt" (i.e., proprietary) setting --casework or group work specialties require LCSW, and "will be examined accordingly." | Essentially same | Task Force recommends eventual generic licensure only for LCSW with specialty designation, if any, left to private sector credentialing. Task Force recommends further study of statutory proposals to add to Board authority to regulate "contractors" or "settings." |
| Registered Social Worker (RSD) | Registered and Associate Social Workers required to complete unspecified examination. These are discontinued categories. | Same | |
| Associated Social Worker (ASW) | | | |
| VETERINARY MEDICINE | | | |
| Veterinarians | Degree in Veterinary Medicine from a veterinary college or university approved by Board (12.C.) | Same OR have met requirements of Education Commission of Foreign Graduates of American Veterinary Medical Association (2.A.1.) | Graduation from Board-approved college or university veterinary medicine program required (§54-784.03.1) |
| | Pass exam of National Board of American Veterinary Medical Association (AVMA) (12.D.5.) | Not mentioned, but Report says Board now offers national exam in Virginia. | Not mentioned |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| VETERINARY MEDICINE (Continued) | | | |
| Veterinarians (Continued) | Good moral character (12.B.) | "Moral character" reference deleted | Not mentioned, but Board is authorized to prescribe conduct and ethical standards. (§54-784.03.8) |
| Animal Technicians | Diploma in Animal Technology from a school accredited by AVMA or approved by Board (12.A.3.) | Diploma from AVMA-accredited school required. Reference to Board-approved schools dropped. (3.1.A.1.) | Necessary qualification "may include graduation from college or university program for animal technicians or a program approved by the Board." (54-784.03.1) |
| | Good moral character (12.A.2) | "Moral character" reference deleted | Not mentioned, but conduct and ethics standards are authorized as for veterinarians (§54-784.03.8) |
| Animal Facilities | Board inspection and registration beford opening (8.B.3. and 21.A.) | Same (4.1.A.) | §54-784.03.7 authorized Board to regulate and inspect "establishments and premises." |
| | Licensed veterinarian as the owner, partner, or officer personally responsible for maintaining facility within standards (21.B.) | Same (4.1.A) | Report proposes removal of total ban on corporate ownership; these existing and proposed regulations may be in conflict with proposal. |
| | Meet detailed standards applicable to all animal facilities (22.) | Meet detailed standards, some made more specific (4.2.A.), but with following new flexibility provided:<br><br>Licensee will need to meet only the standards applicable to facilities used in kind of practice he/she operates, rather than all standards for a full-service facility, provided he/she gets a limited permit and posts its limitations conspicuously. (4.2.B.) (This proviso is presented obliquely following a three-and-a-half-page-long list of requirements for a full-service facility.) | |
| Veterinary Medicine Students | Enrolled and in good standing in school (14.A.) | Same (2.2.A.) | General authority to establish and regulate programs for practical training of qualified students while enrolled in programs of either veterinary medicine or animal technology (§54-784.03.6) |
| | Preceptorship authorized by the school and "officially approved" (14.A.) | Authorized preceptorship "as the Board" (2.2.A.) Requirement for school authorization dropped. (3.1.A.1.) | |

# TABLE C

## Examination Requirements for Regulated Professions and Occupations, by Boards

(For professions or occupations regulated by each board, see Table A.)


Board of Dentistry . . . . . C-1

Board of Funeral Directors and Embalmers . . . . . C-2

Board of Medicine . . . . . C-3

Board of Nursing . . . . . C-4

Certified Nurse Practitioners . . . . . C-4

Board of Optometry . . . . . C-5

Board of Pharmacy . . . . . C-5

Board of Professional Counselors . . . . . C-5

Board of Psychology . . . . . C-6

Board of Social Work . . . . . C-7

Board of Veterinary Medicine . . . . . C-7

NOTE: These tables were prepared for a comprehensive review of the regulations of all health regulatory boards completed in 1985. The regulations proposed by each board have yet to be adopted by the boards. The process of adoption of proposed regulations should be complete by mid-1986.

TABLE C
EXAMINATION REQUIREMENTS FOR REGULATED PROFESSIONS AND OCCUPATIONS, BY BOARD

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| DENTISTRY | | | |
| Dentists | Pass Southern Regional Testing Agency (SRTA) exam; Board will honor results for five years (4.B.1.) | Pass SRTA exam unless an applicant for reciprocity licensure. If more than five years elapses before licensee seeks Virginia license, must retake exam unless licensee can show "continuous active, clinical, and legal practice." (2.2.A.2.) | Exams "of such character as to test the qualifications of the applicants." (§54-171) |
| | Pass exam on Virginia Dental laws and regulations (4.C.1.d.4.) | Pass exam on Virginia dental laws and regulations (2.2.A.3.) | |
| | Pass National Board of Dental Examiners' exams before applying to Board (4.C.1.d.3.) | Pass Parts I and II of Joint Commission of National Dental Examiners' exams before applying to Board (2.2.A.1.) | |
| | See Table B for requirements for national examination program | See Table B for requirements for national examination program | |
| Dental Hygienists | Pass SRTA exam in dental hygiene; board will honor results for five year (4.B.2.) | Pass SRTA exam unless a reciprocity applicant. If more than five years pass before licensee seeks Virginia license, must retake exam unless licensee can show "continuous. . . practice" exactly as for dentists. (2.2.B.2) | Board to determine type of exams given (§54-200.4) |
| | Pass exam on Virginia dental hygiene laws and regulations (4.D.2.d.4) | Pass exam on Virginia dental hygiene laws and regulations (2.2.B.2.) | |
| | Pass National Board of Dental Examiners' exams before applying to Board (4.C.1.d.3.) | Pass Parts I and II of Joint Commission of National Dental Examiners' exams before applying to Board (2.2.A.1.) | |
| | See table B for requirements for national examination program | See Table B for requirements for national examination program. | |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCE |
|---|---|---|---|
| DENTISTRY (CONTINUED) | | | |
| Dental Assistants (Who are specially credentialed for X-Ray) | Pass Board exam in radiation safety & hygiene<br>or<br>an approved course on subject;<br>or<br>be certified by American Society of Radiological Technicians (2.B.2. and 4.B.4.)<br>(Only assistants who elect to qualify; dental assistants are not regulated by the Board) | By July 1, 1986, pass clinical and/or lab course and didactic course and exam given by institution approved by ADA Commission on Dental Accreditation and/or by the Board (4.7.A.12.) | No specific statutory reference |
| FUNERAL DIRECTORS AND EMBALMERS | | | |
| Funeral Service Licensees | Pass Virginia State Board Examination (Short Form) (X.10) covering basic and health services, funeral service arts and sciences, funeral service administration, and other subjects the Board may add (X.3) | Same (3.3) covering same subjects, plus added subject of funeral service law (3.4.B.2) | §54-260.70 lists the exam subjects listed in the regulations. |
| Resident Trainees | No examination. For a certificate, a trainee must complete requirements cited in Table G under "Supervision of Auxiliaries" in a two-year traineeship, with progress reports made to Board every six months by instructor, the training establishment, and the trainee (XIII.1-7.) | Same (5.1-5.5) | §54-260.72 specifies the two-year period and details the requirements. |
| MEDICINE | | | |
| Medicine, Osteopathy, Podiatry, and Chiropractic | Three-part examinations required:<br>• Part I, basic sciences;<br>• Part II, clinical sciences; and<br>• Part III, clinical competence. Lists of individual subjects specified under both Parts I and II as in statutes (3.1.A.) | Details deleted in favor of general statement that applicants may take Parts I & II of the "Federation Licensing Examination" (FLEX) as a unit (3.1.A.) | §§54-297 to 54-300.2 specify the three parts and individual subjects.<br>§54-300.3 permits Board to substitute corresponding parts of FLEX exam of Federation of the State Boards of Medical Examiners for any parts of own exam.<br>Also authorized Virginia Board to |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | | | |
| Medicine, Osteopathy, Podiatry, and Chiropractic (continued) | | | accept a certificate of the national board for appropriate branch of healing arts attesting an applicant's passing corresponding parts of that national board's exam if material and passing grade are deemed equivalent. |
| Medicine & Osteopathy | Identical exams required for these two fields | | |
| Chiropractic | Content differs from above, especially Parts II and III.<br><br>Chiropractic member of Board administers parts II and III of this exam | | |
| Podiatry | All parts differ widely (3.1.A.)<br><br>Podiatrists who have passed National Board of Podiatry exam and meet all other entry requirements to Virginia Board exam may have its basic sciences portion waived. May also substitute national Part III exam for Virginia Board's (3.3) | | |
| Physical Therapist and Physical Therapist Assistant | Exam administered by Physical Therapy Advisory Committee (VI) | Same, except once per fiscal year, rather than twice a year (3.1.B.) | §54-295.6 and 54-308.7 |
| | Prepared and graded by Professional Examination Service (PES) [VI.1.(a)] | Same | |
| | Scores filed with International Reporting Service of PES [VI.1.(b)] | Deleted | |
| | Detailed list of subjects specified:<br>• for physical therapist (VI.8)<br>• for physical therapist assistant (VI.9) | Deleted | §54-308.6 (e) |
| Physician Assistant--Category I | Physicians' Assistant:<br>• pass "Primary Care"exam given by NCCPA (IX.2.a)<br>• take specialty exam if to specialize | No separate exams or categories. Proficiency exam of NCCPA constitutes Board exam (3.1.) Must take at time scheduled by NCCPA (3.3) | §54-281.7 |
| | Assistant to Podiatrist; take exam of Examining Board of American Society of Podiatric Assistants [IX.2 (c)] | | |
| Physician Assistants--Category II | May be registered "based upon experience and/or completion of an approved training program in lieu of testing." (Preamble) | Same (Preamble) | §54-281.7 |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| NURSING | | | |
| | Board "shall review and adopt" as its exams the "National Council Licensing Examinations" for RNs and LPNs (5.1.a.)<br>• passing score on RN exam (effective 7/21/82) to be the standard score of 1600 (5.1.b.)<br>• passing score on LPN exam to be the standard score of 350 (5.1.c.) | Exams of the National Council of State Board of Nursing constitute the Board exams for RNs and LPNs (3.1.A.)<br>• passing score on RN exam to to be the scaled score of 1600 (3.1.B).<br>• passing score on LPN exam to be the scaled score of 350 (3.1.C.) | §§54-367.13 (a)(4) and 54-367.19 (a)(4), for RN and LPN applicants respectively, specify only that they pass "a written examination as required by the Board." |
| NURSE PRACTITIONERS | | | |
| | No state examinations: Virginia certification is based on qualifying as stated in Table B. | No state examinations; Virginia certification is based on qualifying as stated in Table B. | |
| OPTOMETRY | Written exam of National Board adopted as written exam of Virginia Board, but board may substitute own written exam. Applicant must also pass a practical exam by Virginia Board. (VI) | Same, except that reference to Board's discretionary use of its own written exam as substitute for national is deleted (2.1.A.) | §54-380 authorizd Board to set standards for its exams. §54-386.1 requires "a Board-administered, perfomance-based-exam on general and ocular pharmacology" --after successful completion of a Board-approved course of at least 55 classroom hours in three specified areas. The course must be one given by college or university accredited by a body recognized or approved by the Council on Post-Secondary Accreditation or by the United States Department of Education. |
| | No mention; regulations predate the law | Only mention of exam is in fee list. No mention of the prerequisite course. No citing of §54-386.1 either. | |
| PHARMACY | Examination may be in 3 portions--theory, practical, and pharmacy law (6.A.) | Same (2.3.A.) | Board to give exams at least twice a year (§54-524.4) |
| | Passing grades are 60 on theory 75 on practical, and average for the two must be 75. Passing pharmacy law takes 75. (6.B.) | Same [2.3.B.(1)], plus added provision that at such time as an integrated exam is given, individual subjects (apparently meaning theory and practical) would not be identified and passing grade would be 75 ; pharmacy law, still separate, requires 75 as before. [2.3.B. (2)] | |



(Continued)

| BOARD AND PROFESSION/OCCUPATIONS | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| PROFESSIONAL COUNSELORS | Generic: Two part written exam (objective, multiple-choice, source unspecified) offered twice annually, and an essay examination on applicants stated area of practice, laws governing practice, regulations of the Board and Code of Ethics of the Board. Applicants who pass are then required to submit to oral examination consisting of interivew by Board including evaluation of applicants' "professional, emotional and social maturity', "extent and nature of applicant's professional identity", knowledge of Code of Ethics, discussion of work sample, "probing and evaluating the applicant's knowledge of and judgment in professional counseling." Board sets passing scores. | Generic: Basically the same except notation that objective exam is "nationally validated" (but unspecified).<br>Specialty: Examination is part of the essay examination, majority of Board determines pass/ fail of essay and oral examination Examination Committee must include a Board member or designee in the area of applicant's specialty. | Board has removed some subjective aspects related to personal characteristics, professional ideologies, etc. Alternatives to examination procedures and requirements (such as eliminating specialty examination and substituting private sector specialty credentialing) are not discussed.<br>---<br>Although Board has recommended absorption of the Substance Abuse Certification Committee's functions (including examination procedures) no discussion or proposals are included in antcipation of this possibility. |
| PSYCHOLOGY | Examinations consist of three components:<br>National Licensing Exam<br>Essay Exam (Board prepared)<br>Oral Exam<br>National Licensing Exam is product of Professional Examination Service and American Association of State Psychology Boards. Passing scores of 65 percent required for National and Essay Exam.<br>Oral exam consists of interview and evaluation of two work samples graded blindly. An "orals brief" is also required setting forth applicant's specialty interests, theoretical and professional orientation, nature of current practice, statement of areas of competence (e.g., populations served, assessment instruments used, intervention techniques, etc.) | Basically the same except the two work samples required for orals differentiate "health service providers" and "non-health service providers." | Examinations are for generic licensure; specialty credentailing apparently depends on performance on oral examinations. |
| SOCIAL WORK | Licensed Social Worker. Two-part examination required:<br>–National examination (source unspecified) consisting of objective, multiple-choice items.<br>–Essay and/or objective items covering law, regulations, and ethics. | Proposed examination procedures and content are basically the same except for improvements in clarity of presentation | The Board has clarified its examination procedures but some ambiguity and subjectivity remain, as in "evaluating maturity," "determining clinical skills as demonstrated in work sample" and evaluation of "extent and nature of professional identity; his/her |

(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| SOCIAL WORK (Continued) | Licensed Clinical Social Worker. Three-part examination required<br>–National exam as above<br>–Written exam as above to include area(s) of practice<br>–Oral exam consisting of interview "evaluating the applicant's professional, emotional and social maturity," etc. and evaluation of a work sample.<br><br>Board sets passing scores. Majority of Board must pass applicant on essay and oral exam.<br>Other. Reference is made to exams for Associate and Registered Social Worker but no detail is provided. | Procedures are unclear in both existing and proposed regulations as to how "case-work" and "group work" specialties are examined. | knowledge of ethical professional behavior and probable ability to successfully apply such knowledge in professional practice." |
| VETERINARY MEDICINE | | | |
| Veterinarians | Practical exam given by Board (13.A.2) | Same (2.1.A.3.b.)<br><br>NEW:<br><br>National clinical competency test required. (2.1.A.3.a.) | General authority (§54-784.03.3) |
| Animal Technicians | Regulations say what applicant must do "to be qualified to be examined by the Board for a certificate," but do not mention the exam. | 3.1 states (in the identical language quoted at left) what one must do "to be qualified to be examined by the Board" (3.1.A.)–Then under the same A. specifies:<br>"Pass the examination of the board . . . two parts"<br>--state board practical exam<br>--national board exam (3.1.A.5.a. & b.) | |

# TABLE D

## Reciprocity Arrangements, if any, for Regulated Professions and Occupations, by Board

(For professions or occupations regulated by each board, see Table A.)


Board of Dentistry . . . . . D-1

Board of Funeral Directors and Embalmers . . . . . D-2

Board of Medicine . . . . . D-3

Board of Nursing . . . . . D-5

Certified Nurse Practitioners . . . . . D-5

Board of Optometry . . . . . D-6

Board of Pharmacy . . . . . D-6

Board of Professional Counselors . . . . . D-7

Board of Psychology . . . . . D-7

Board of Social Work . . . . . D-8

Board of Veterinary Medicine . . . . . D-8

NOTE: These tables were prepared for a comprehensive review of the regulations of all health regulatory boards compelted in 1985. The regulations proposed by each board have yet to be adopted by the boards. The process of adoption of proposed regulations should be complete by mid-1986.

TABLE D
RECIPROCITY ARRANGEMENTS, IF ANY, FOR REGULATED PROFESSIONS AND OCCUPATIONS, BY BOARD

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| DENTISTRY | | | |
| Dentists | All applicants must take SRTA exam (4.B.1). | Board may "upon proper application" license dentists already licensed by another state with which the Board has established reciprocity (2.3.A.). [Note that 2.2.A.3. says all applicants must take exam on laws and regulations.] 'The Board proposes to implement when asked to do so by individual applicants for licensure §54-173 and §54-200.5 of the Code and enter into a reciprocal licensure arrangement with a state having comparable requirements, thus waiving the clinical examination for certian out-of-state applicants. As Arkansas, Kentucky, and Tennessee are the other three states that accept the results [of SRTA], it is possible that the first requests for licensure by reciprocity may come from... one of these three states. | Board at its discretion may establish reciprocity with other states having comparable requirements. May give applicant from such states a one-year probationary license, then a regular license. No mention made of an exam. (§54-173). Tying reciprocity to individuals' requests from SRTA--participant states appears to limit reciprocity too narrowly. "Comparable requirements" assessment could proceed without linkage to individuals' requests or SRTA participation. |
| Dental Hygientists | All applicants must take SRTA exam (4.B.2.) | Board may, on proper application, license dental hygienists licensed by another state with which it has established reciprocity (2.3.B). [Note 2.2.B.3. says all must take exam on laws and regulations.] Proposed reciprocal arrangements for dental hygienists would mirror the proposal for dentist above. | For hygienists, §54-200.5 contains identical provision to that of §54-173 above for dentists. Comments related to dentist reciprocity above apply as well for dental hygienists' reciprocial arrangements. |
| FUNERAL DIRECTORS AND EMBALMERS | | | |
| Funeral Service Licensees | Licensee of another state may be licensed in Virgina if the two have a reciprocity agreement (License is Virginia Funeral Service (License) | The equal privileges proviso has alternatives; "establishment of similar substantially licensure requirements and/or reciprocity agreements. . ." (4.2.A.) | §54-260.72 authorizes reciprocity linked to resident trainee provisions. |
| | Regulation cites Code §54-260.72, the resident trainee section. | Same (4.2.A.1) | If out-of-state person immediately before applying has been employed in the profession full time: |



(Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATION | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| FUNERAL DIRECTORS AND EMBALMERS (Continued) | | | |
| Funeral Service Licensees (Continued) | Fee for initial Virginia License of out-of-state person is $200 "regardless of month and year of issue." (XI.3.) | Fee for initial Virginia license of out-of-state person is $100 in even-numbered years and $200 in odd-numbered years. (11.1) | •for 10 years, he is exempt from traineeship requirement;<br>•for five years, he is exempt from one year of traineeship |
| | Corresponding initial licensure fee for Virginia resident is $50 in even-numbered years; $100 in odd-numbered years (XI.2) | Corresponding fee for Virginia resident is $50 in even-numbered and $100 in odd-numbered years. (11.1) | |
| | Fee for license renewals following initial licensure is "the prevailing biennial renewal fee for Funeral Service Licenses" (same for all) (XI.3) | Biennial renewal fee for all Funeral Service licenses is $100 (11.1) | |
| | | Applicants must pass Virginia Board exam (4.2.A.2.) | Applicants must take only the Virginia exam. |
| | Out-of-state licensee practicing in a state with substantially similar license requirements to Virginia's and which has an agreement with Virginia may obtain a courtesy card from Board permitting him/her to remove bodies from and arrange funerals in Virginia, but not to engage generally in establishing, or be employed in such a business, or to advertise or solicit business in Virginia. | Same (4.3.) | |
| | Annual renewal fee to be not less than half the prevailing biennial renewal fee (now $70) for a Funeral Director's license (XI.4.) | Annual renewal fee $50. (11.1)<br>Biennial renewal fee for Funeral Director's license--$70 (11.1) | Statute specifies same provisions (but not fees) |
| MEDICINE | | | |
| Medicine, Osteopathy, Podiatry, and Chiropractic | General: | General: | |
| | Each applicant on own merits; must have passed exam equivalent to Virginia's; meet other Virginia requirements. (4.1.A.) | Same (4.1.A.) | §54-310 |
| | Letter from two "legally qualified and reputable" practitioners in U.S. or Canada on his/her moral character and professional ability and listing the practioners' medical school, date of graduation, and states where licensed. (4.1.D.) | Deleted | |
| | If applicant not licensed, must have passed FLEX exams with grades equal to Virginia requirements (4.1.F.) | | |
| | or | | |
| | If practiced 10 yrs. or more in U.S. or its Armed Services (4.1.G)<br>(1) Must have been licensed in another state 10 years; | Deleted | |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | | | |
| Medicine, Osteopathy, Podiatry, and Chiropractic (Continued) | (2) Letters from 2 practitioners of same branch who have known him/her 10 years or more;<br>(3) Proof of practice such as endorsement by professional society, hospital officials; and<br>(4) If on basis of Armed Services practice, a certification from commanding officer or personnel division on length of service and honorable discharge. | | |
| | If a diplomate of Licensing Medical Council of Canada, submit verification of license and exam grades, documentation of graduation and training. (4.1.H.) | Deleted | |
| Medicine | Passing 3-part exams of National Board of Medical Examiners or equivalent qualifies for licensure without exam. (4.1.I) | Same, plus "meets the requirements of the Virginia Board" (4.1.B.) | |
| Osteopathy | Passing 3-part exam of National Board of Examiners for Osteopathic Physicians and Surgeons does same. (4.1.J) | Same (§4.1.C.) | |
| Podiatry | Being diplomate of National Board of Podiatry Examiners passing a 3-part exam and meeting Virginia Board requirements does same. (4.1.K) | Same, "plus "passed a clinical competence examination equivalent to" Virginia exam (4.1.D.) | |
| Chiropractic | Passing exam of National Board of Chiropractic Examiners and meeting Virginia Board requirements does same. (4.1.L.) | Same, plus "passed an examination equivalent to" Virginia Board's Part III exam. (4.1.E.) | |
| Practitioners (any branch implied) invited to Virginia from another state or country | Exempted from licensure for 2 weeks if invited by: | Same if: | §54-276.5 |
| | •A Virginia licensee for consultation (4.3.C.1) | Same (4.3.A.) | |
| | •Medical school or organization for furthering medical education (4.3.C.2) | Deleted | |
| | •Exemption beyond 2 weeks requires Board approval | Same (4.3.B) | |
| Physical Therapist and Physical Therapist Assistant | Licensed by exam in another state equivalent to Virginia exam (VIII.1.) | Same (4.1) | |
| | Board neither accepts nor reports to another board a candidate's scores on P.E.S. exam. These to be obtained only from International Reporting Service P.E.S. (VIII.2.) | Deleted | |



(Continued)

| BOARD AND PROFESSION/OPCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| MEDICINE (Continued) | | | |
| Physical Therapist and Physical Therapist Assistant (Continued) | -If practiced 10 yrs. or more in U.S. its Armed Services, Public Health Services, or Veterans' Hospitals, same rules apply as shown for Medicine, Osteopathy, Podiatry, and Chiropractic. (VIII.3.) | -Deleted | |
| NURSING | Graduate of a state-accredited or -approved program licensed by exam in another U.S. jurisdiction and whose license is in good standing shall be eligible for licensure by endorsement in Virginia provided requirements of other jurisdiction for licensure were equivalent to those in Virginia at time the applicant was initially licensed (5.2.a.) | Same, except "state-accredited -approved program"; is changed to" an approved nursing education program". (3.2.A)Applicant must submit application and fee and submit to the credentialing agency in state of original licensure the required form for vertification of licensure. Board will notify applicant after 30 days if form has not been been received(3.2.B.) If not completed within year, will be retained on file by Board as required for adult (3.2.C.) | §543-367.14 authorized Board to license for professional nursing by endorsement if applicant meets qualifications "required of registered nurses in this state."<br><br>§54-367.20 provides matching conditions for licensing LPNs by endorsement.<br><br>Board of Nursing has widest implementation of reciprocity of all DHRB Boards |
| | If application is not completed within one year of initial filing date, it is deemed abandoned. (5.2b.) | | |
| NURSE PRACTITIONERS | Reciprocity not mentioned--is not pertinent: Virginia certification is based entirely on applicant's meeting all requirements of Virginia regulations; requires both the completion of the applicable educational program and the national certification specified above (Table B.). Certification by another state is not a factor in this approach. | | |
| OPTOMETRY | No mention--but no mention either of any Virginia residency requirement. Also fee list--by making no reference to state of residency--provides same fees for all. | Same | Person who has "successfully passed" a standard exam in optometry in any state of the U.S. and holds certificate from its board may be issued a certificate to practice in Virginia without exam on payment of the regular exam fee, provided:<br>•he has conducted an ethical professional practice of optometry for at least one year next prior;<br>•the standard for his original certification was at least equal to this state's standard;<br>•he has not failed an exam before the Virginia Board; and<br>•his former state grants like privileges to persons who have passed the Virginia Board exam (§54-384) |

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS STATUTORY REFERENCES |
|---|---|---|---|
| PHARMACY | License must be from a state that also grants reciprocal license to Virginia licensees (9.A.) and has requirements at least equal to Virginia's:<br>For legal qualifications (9.A.)<br>For exam and passing grades (9.C.) | Deleted | Board may issue temporary or probationary license for period not less than one year, without exam, to persons licensed by exam in another state who present evidence of qualifications equal to Virginia requirements. At end of year may issue regular license to those "whose qualifications are in accordance with the regulations established by the Board." --No mention of other states' granting reciprocal licensure to Virginia licensees. (§54-524.26) |
| | Graduate of approved school of pharmacy (9.B.) | Deleted here (but 2.4.A.-B. applies to all) | |
| | Pass Board exam in pharmacy law with grade of at least 75. (10.A.1) | Same (2.5.A.1.) | |
| | Board Secretary may issue license subject to acceptance by Board at its next meeting. (10.A.) | Board Executive Director may issue to out-of-state licensee "who possesses the legal qualifications," subject to Board acceptance next meeting. (2.5.A.) | |
| | Fee for temporary or probationary or reciprocal license is $300. (1.B.)<br>Regular fee for Virginia licensee applicant via exam is $200 (1.A.) | Same (1.B.)<br>Same (1.A.) | Fee for above license to be determined by Board (§54-524.6) |
| PROFESSIONAL COUNSELORS | The regulations of the Board of Behavioral Sciences for the Board of Professional Counselors provide that "the written examination(s) may be waived for the applicant certified or licensed in another jurisdiction where it is adjudged by the Board . . . that the applicant was so certified or licensed by equivalent procedures." | The Board may waive the objective examination if it adjudges that applicant has been certified or licensed in another jurisdiction by standards and procedures equivalent to its own.<br>Foreign graduates are not specifically addressed. | The Board has proposed that its reciprocity provisions be made more restrictive by requiring out-of-state candidates to submit to both essay and orals, rather than the previous requirement for orals only.<br>Reciprocity is presently in effect for Idaho and California. The requirements of the Virginia Board are possibly the most restrictive in the U.S., therefore, expanded reciprocity under present system would appear to be limited. Proposed regulations do not address foreign graduates but the Board states "licensing foreign-trained counselors is not a serious problem; each counselor is dealt with individually." |
| PSYCHOLOGY | Written exams may be waived for applicants from other jurisdictions who are certified or licensed in accordance with standards adjudged by the Board to be equivalent. Waivers are considered only on an individual case basis and in no event are orals waived. | Provisions are essentially the same except waivers for ABPP diplomates are no longer permitted. Board has added provision that requirements for examination may be waived in extraordinary circumstances (defined as achievement of state or national recognition in the field of psychology by | Virginia's requirements are generally known to be the most specific and difficult of all states. It is unlikely that entrants from other states could be considered equivalent. Reciprocity should be applicable on a class, not individual basis, i.e., all those credentinled by states having comparable requirements should be eligible for waivers. |

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| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| PSYCHOLOGY (Continued) | Written exams <u>may</u> also be waived for applicants who are diplomates of the American Board of Professional Psychology | those whose education and training equals or exceeds that otherwise required). | |
| SOCIAL WORK | <u>Licensed Social Worker</u><br>Written exams may be waived for applicant certified in another jurisdiction when Board adjudges requirements to be equivalent. | The Board may waive the written examination in whole or in part if it adjudges candidate credentialed from another jurisdiction to have met equivalent requirements. | |
| | <u>Licensed Clinical Social Worker</u><br>A <u>portion</u> of the written examination may be waived. Oral examinations may not be waived. | Oral examinations may not be waived. | |
| VETERINARY MEDICINE | | | |
| Veterinarians | At its discretion, Board may grant a licensed based on a practical exam administered by Virginia Board, to an applicant licensed in another jurisdiction subject to five provisos: | Discretionary licensing of out-of-state licensee provided for those graduated five years or more before applying and subject to revised five provisos (2.1.8.): | Board has authority "to establish the qualifications necessary for licensure to practice veterinary medicine in this state . . " (§54-784.03.1) |
| | Board's opinion he/she has met all requirements for other applicants except filing of the Interstate Reporting Service report of his/her grades on the national board exam; | Meeting all other requirements of section (2.1.B.3.) | |
| | Endorsement in writing to the Virginia Board by the board of state(s) where he/she holds or has held a license; | Passing national clinical competency test--with subproviso that this too may be waived if he/she has been continuously in practice the last five years (2.2.B.1.); | |
| | Proof that license is valid and in good standing; | Verification by the other board that the applicant is in good standing (2.1.B.4.); | |
| | Documentation of all professional activities since graduation from approved school, with verification by the other state's board, and acceptance by Virginia Board of the documentation; and | Documentation by applicant specified; but requirement for verification by his board of these activities is deleted (2.1.B.5.). | |
| | "To insure the competence of the applicant, the (Virginia) Board may require and specify a period of additional clinical experience under the supervision of a veterinarian or institution approved by the Board." (13.B.1-5) | Reference to obtaining additional experience deleted. Passing Board practical exam added (2.1.B.2.). | |

Continued)

| BOARD AND PROFESSION/OCCUPATION | EXISTING REGULATIONS | PROPOSED REGULATIONS | NOTES AND COMMENTS/ STATUTORY REFERENCES |
|---|---|---|---|
| VETERINARIANS (Continued) | (No reference to other state's having requirements equal to Virginia's, or to establishing reciprocity agreements.) | (No reference to reciprocity or equal standards) | |
| Animal Technicians | Board may waive national board exam for animal technician certified or licensed in another state when he/she applies, subject to following four provisos:<br>•Board's opinion he/she has met all requirements for examination by Board<br>•"The applicant has filed the required application . . . "<br>•The applicant has a certificate from a state "whose requirements are at least equal to" Virginia's, and<br>•The applicant furnishes certificate of good standing from the other state at time of applying to this state. (17.A.1-4.) | Board may grant certificate, based on a Board-Administered practical exam, to technician certified or licensed out-of-state who has not taken national exam--subject to same four provisos in existing regulations (3.1.B.1-4). | Board has authority "to establish the qualifications necessary to act as animal technican in this state . . " (§54-784.03.1) |

# APPENDIX D

INTRODUCTION TO HEALTH OCCUPATIONS (3302) COURSE OUTLINE*

I. Introduction to Course

- A. Purpose, competencies, textbooks, and references of course
- B. Student goals
- C. Classroom management
- D. Study habits

II. Health Occupations Students of America (HOSA)

- A. Terminology
- B. Purposes
- C. Structure of meetings
- D. Functions and qualifications of officers
- E. Activities of club

III. Health Care Industry

- A. Terminology
- B. History
- C. Organization
- D. Major factors influencing health care
- E. Health care delivery systems
- F. Future of health care industry

IV. Health Care Workers

- A. Qualities and characteristics
- B. Employment skills
- C. Ethics
- D. Legal aspects

V. Health Careers

- A. Terminology
- B. Duties
- C. Specialities
- D. Education
- E. Personal qualifications
- F. Earning potential
- G. Licensing
- H. Work environment
- I. Career ladders
- J. Advantages/disadvantages
- K. Professional organizations and publications

* Abbreviated version

VI. Regulation of the Health Professions and Occupations

A. Virginia's law
B. Purpose
C. Public participation in regulation
D. Virginia Department of Health Regulatory Boards
E. Virginia Commission of Health Regulatory Boards
F. Methods of regulation of health care providers
G. Virginia's ten health professional boards and whom they regulate
H. Educational or other entry requirements for regulated professions or occupations (by Board)
I. Examination requirements for regulated professions and occupations (by Board)
J. Reciprocity provisions

VII. Safety

A. Safety regulations
B. Body mechanics for the health worker
C. Fire safety

VIII. Epidemiology

A. Terminology
B. Purpose
C. Methods
D. Aseptic handwashing
E. Leading causes of death

IX. Consumerism

A. Terminology
B. Health maintenance
C. Consumer rights
D. Insurance
E. Health maintenance organizations
F. Effect of the elderly on health care systems
G. Varying viewpoints in health care
H. Marketing in the health care industry

X. First Aid

A. Terminology and abbreviations
B. Obstructed airway
C. Shock
D. Bleeding wounds
E. Victim of poisoning
F. Burns
G. Heat and cold exposure
H. Bone and joint injuries

I. Splint application procedures
J. Sling application procedures
K. Bandage application procedures
L. Dental injuries

XI. Cardiopulmonary Resuscitation

A. One-rescuer CPR (Heartsaver)
B. One-rescuer CPR
C. Two-rescuer CPR
D. Obstructed airway
E. Infant resuscitation
F. Conscious choking infant
G. Choking infant who becomes unconscious or is found unconscious

XII. Summary

A. Career goals
B. Course evaluation